

Account Authorisation Form



By completing this form, you acknowledge and warrant that you are authorised to act in relation to the account for the business named in this form, and that all details are true and correct.

This form must be completed by the person who is the new authorised account holder.

Return to: Zettagrid Support

Email: support@zettagrid.com

Please tick to confirm that you are the new authorised account holder because:

- The previous authorised account holder is no longer with the business.
- The authorised email address cannot be used to send (ie. it is a distribution list).
- Other. Please specify:

Existing Account Details

Please provide your existing account details

Customer ID / Account Number	
Account Name / Company Name	

New Authorisation Details

Please provide us with your details

Full Name	
Contact Email Address	
Contact Telephone Number	
Mailing Address	

Authorisation

Full Name:	Business Title:
Signature:	Date:

Please note that in order to proceed with account authorisation you must send this form to support@zettagrid.com and ensure to attach a copy of your valid photo ID.

Checklist

- Completed form attached.
- Copy of valid photo ID attached.