

AUTHORITY TO ACT AS LICENSED CUSTOMS BROKER

In accordance with Section 181 of the Customs Act 1901 (**Act**), I/We do hereby authorise Seabridge Logistics Group Pty Ltd (**LCB**), its nominees and/or sub agents as may be appointed by the LCB from time to time, to act as my/our Licensed Customs Broker for the purposes of the Act, at all places in the Commonwealth including dealing on my/our behalf with the Australian Border Force (**ABF**).

I/We further authorise the LCB to complete processing and associated functions as required by the Department of Agriculture Fisheries and Forestry (**DAFF**).

I/We authorise the LCB to quote our Australian Business Number (**ABN**): _____ as may be required by the Australian Taxation Office (**ATO**) and GST legislation in respect of imported goods at the time of entry for home consumption or entry for warehousing with the ABF, and in relation to the reporting and associated processing of import/export cargo.

I/We further authorise the LCB to deal on my/our behalf with any other government agencies who have jurisdiction over my/our import or export of goods including, without limitation, the ABF, the ATO and DAFF.

I/We agree to reimburse, upon invoice from the LCB, all necessary costs involved with:

any further directions imposed by the ABF, ATO or DAFF for the clearance and release of my/our goods including fumigation or other treatment required by DAFF or as required by the ABF for the movement of goods; or

- a) any actions taken or requirements imposed by one or more third parties involved in the supply chain that transports my/our goods.

Unforeseen charges may not be included in original quote/invoice as some costs cannot be calculated before they are incurred.

I/We agree that all transactions undertaken by the LCB it's nominees and/or it's agents on behalf of myself/this company, are done so subject to their Standard Trading Terms and Trading Conditions to be found at <https://seabridge.com.au/forms/trading-conditions-au>.

I/We also agree that this Authority also applies to the LCB, its nominees and/or agents in dealing with any successor agencies to the ABF, ATO and DAFF and other relevant agencies on my/our behalf.

Company or Business Name:	
Business Address:	
Signature of Authorised Signatory:	
Authorised Signatory's Name:	
Title / Position of Signatory:	
Date:	