

# LETTER OF AUTHORISATION FORM FOR PICK UP



**BACKYARD™**  
**CHICKEN COOPS**

Backyard Chicken Coops  
PO Box 2775, New Farm, QLD 4005  
Email : sales@backyardchickencoops.com.au  
Phone : 1300 918 758

Date of Pick Up

## SECTION 1 : CUSTOMER DETAILS

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Sales Order No.

Full Name

Address

Suburb

State

Postcode

Mobile

## SECTION 2 : AUTHORISED 3<sup>RD</sup> PARTY PICK UP DETAILS

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Full Name/Company Name

Consignment No. (if applicable)

## SECTION 3 : AUTHORISATION

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Please accept this letter as confirmation that I authorise the **nominated person in Section 2** to act on my behalf for pick up.

Customer Signature \*

**\* IMPORTANT :** Customers are required to attach their drivers license or photo I.D for account identification. Please note that the account holder is the person registered to have purchased the item from Backyard Chicken Coops.

\* Person picking up the item on behalf of the account holder needs to provide Backyard Chicken Coops with a photo I.D for approval purposes.

## SECTION 4 : PICK UP (OFFICE USE ONLY)

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Authorised 3<sup>rd</sup> Party Signature \*