

## **DOMAIN NAME PASSWORD RECOVERY FORM**

- Please use this form ONLY if the current listed email address for your domain name is INVALID.

- You can find out your registrant contact email address by performing a whois search here:

[http://whois-generic.ausregistry.net.au/whois/blank\\_whois\\_local.jsp](http://whois-generic.ausregistry.net.au/whois/blank_whois_local.jsp)

- If your email address is valid, please use the online retrieval tool at:

<https://www.domainregistration.com.au/domains/manage/retrievepassword.php>

Please note: If you are not the current Registrant Contact for this Domain Name as shown in the registry:

[http://whois-generic.ausregistry.net.au/whois/blank\\_whois\\_local.jsp](http://whois-generic.ausregistry.net.au/whois/blank_whois_local.jsp) and wish to have the Domain Name Password sent to you, you must hold the position of Owner of the organisation/Licence Holder or its Chief Executive Officer, Chief Operating Officer, Managing Director or General Manager. No other positions will be accepted.

DOMAIN NAME: \_\_\_\_\_

I \_\_\_\_\_ hereby request and authorise Domain Name

Registrar (Australia) Pty Limited, also trading as Domain Registration Services to change the authorised Registrant contact e-mail address for the above

domain name to the following email address \_\_\_\_\_

and re-issue the domain name password.

I warrant that I am authorised to make the above request as/or on behalf of the licence holder. I agree that Domain Name Registrar (Australia) Pty Limited is not responsible for any demand which may be made against me or Domain Name Registrar (Australia) Pty Limited by any party as a result of the change of domain name Registrant contact email address or the issue of the domain name password pursuant to this form and I agree to hold harmless and release Domain Name Registrar (Australia) Pty Limited from and against any claims.

**PLEASE WRITE IN BLOCK LETTERS. IF WE CANNOT READ AND VERIFY YOUR REQUEST IT WILL NOT BE PROCESSED**

Name of organization: \_\_\_\_\_

Your Name: \_\_\_\_\_

Position: \_\_\_\_\_

Your daytime telephone contact number: \_\_\_\_\_

Your email address: \_\_\_\_\_

Signature: \_\_\_\_\_ DATE \_\_\_\_\_

Witness Signature \_\_\_\_\_ DATE \_\_\_\_\_

Witness Name: \_\_\_\_\_

Witness Address: \_\_\_\_\_

**The following supporting documentation must be attached:**

- A photocopy of the signatory's drivers' licence.
- A signed request on the letterhead of the Licence Holder requesting that the Registrant Contact email address be updated and the domain name password re-issued as set out in this form.
- Copy of the certificate of business/company registration or ABN notice as issued by the tax office of the registrant organisation.

WHEN COMPLETED, FAX THIS FORM TOGETHER WITH THE SUPPORTING DOCUMENTATION TO DOMAIN NAME REGISTRAR (AUSTRALIA) PTY LTD

FAX 039370 0652

**IF ALL REQUIRED DOCUMENTATION IS NOT RECEIVED THIS FORM WILL NOT BE PROCESSED.**

Once you receive your domain name password you may update your registrant contact details via the following page of our website:

<https://www.domainregistration.com.au/domains/manage/>