INTREPID COLLECTIONS & ACCOUNTS GROUP
ABN: [ABN] ACN: [ACN]
[Business Address], Brisbane QLD [Postcode]
Phone: [Phone Number] | Email: [Email Address] | Web: [Website]

CLIENT AUTHORITY TO REFER DEBTOR FOR EXTERNAL ASSISTANCE

Insolvency, Finance, Turnaround, Hardship or Financial Stress Referral Authority

ICAG Reference	[ICAG Reference]	**Authority Date**	[Date]
Client / Creditor	[Creditor Legal Name]	**Client ABN**	[Creditor ABN]
Client Contact	[Client Contact Name]	**Client Reference**	[Client Reference]
Debtor	[Debtor Legal Name]	**Debtor ABN**	[Debtor ABN, if applicable]
Account / Matter Ref	[Account Number]	**Current Balance**	[Total Amount Due]
Referral Reason	[Cashflow hardship / financial stress / insolvency indicators / turnaround support]	**Dispute Status**	[No dispute recorded / disputed / unknown]

TO THE CLIENT / CREDITOR

Dear [Client Contact],

ICAG has identified that the debtor may be experiencing cashflow hardship, personal financial stress, business financial stress, insolvency indicators, or related circumstances that may affect their ability to resolve the outstanding account through ordinary collection activity. This authority form allows you to instruct ICAG whether the debtor should be referred to an appropriate external assistance provider or specialist for possible support, assessment, or advisory options.

PURPOSE OF REFERRAL

The purpose of the proposed referral is to determine whether the debtor may benefit from specialist assistance that could improve the prospects of an orderly resolution, restructuring, repayment proposal, business turnaround, insolvency advice, finance assistance, or other appropriate support.

- This referral is intended to support commercial resolution where standard collection action may not be appropriate or effective.
- The referral does not waive the debt unless the client provides separate written settlement or release instructions.
- The referral does not require ICAG to provide legal, insolvency, financial, credit, taxation, or accounting advice.
- Any external provider will act under its own terms and professional obligations.

MATTER SUMMARY

Item	Details
Original debt amount	[Original Debt Amount]
Current balance	[Current Balance]
Debt basis	[Invoices / contract / goods or services / account]
Recovery stage	[Current stage of ICAG recovery process]
Debtor engagement	[Responsive / limited response / non-responsive]
Reason referral is being considered	[Cashflow hardship / business stress / personal financial stress / insolvency indicators / other]

EXTERNAL ASSISTANCE OPTIONS

Referral Option	Purpose	Authority
Insolvency practitioner / restructuring adviser	Assessment of insolvency risk, restructuring options, voluntary administration, liquidation, bankruptcy-related pathways, or business rescue options.	☐
Finance broker / funding specialist	Review whether finance, refinance, invoice funding, asset finance, or working capital options may assist resolution.	☐
Business turnaround adviser	Support for business cashflow, operational restructuring, creditor management, repayment proposal, or turnaround planning.	☐
Financial counsellor / hardship support	Support where the debtor is an individual or consumer experiencing personal hardship or financial stress.	☐
Accountant / business adviser	Review financial position, tax obligations, cashflow, and commercial options.	☐
Other assistance provider	[Specify provider / purpose].	☐

RECOMMENDED APPROACH

ICAG Recommendation	Select	Notes
Refer debtor to external assistance provider while maintaining file monitoring.	☐	[Recommended where support may improve repayment or settlement prospects.]
Pause active collection activity pending debtor engagement with assistance provider.	☐	[Recommended where vulnerability, hardship, or regulatory risk is present.]

Continue collection activity while offering referral details to debtor.	☐	[Recommended where urgency remains but assistance may be helpful.]
Do not refer debtor at this stage. Continue standard recovery pathway.	☐	[Insert reason.]
Client to nominate preferred provider.	☐	[Provider name and contact details.]

CLIENT AUTHORITY

Please select the authority you wish to provide and return the completed form to ICAG.

Instruction	Authorised
I authorise ICAG to refer the debtor to an appropriate external assistance provider for possible insolvency, finance, turnaround, hardship, or financial stress support.	☐
I authorise ICAG to share relevant account information with the provider only to the extent reasonably necessary for the referral and subject to privacy and confidentiality requirements.	☐
I authorise ICAG to pause collection activity for [number] days while referral engagement is assessed.	☐
I authorise ICAG to continue normal collection activity while offering referral options to the debtor.	☐
I do not authorise referral at this stage.	☐

CLIENT CONDITIONS OR LIMITS

Condition / Limit	Details
Maximum referral cost authorised	[$Amount / Nil / By further approval only]
Preferred provider	[Provider name / No preference]
Information sharing restriction	[Insert restriction, if any]
Collection pause period	[Number of days / Not applicable]
Settlement authority	[No authority / Separate authority required / Specify]
Other instructions	[Insert client instructions]

CLIENT ACKNOWLEDGEMENT

- ICAG is not providing insolvency, financial, legal, taxation, accounting, credit, or investment advice by recommending or facilitating a referral.
- Any decision to accept a repayment proposal, settlement, payment plan, restructuring proposal, deed, insolvency proposal, or other arrangement remains subject to the client's separate written approval unless authority is expressly provided.
- The debtor may decline to engage with an external assistance provider.
- The referral may not result in payment or improved recovery prospects.
- Further collection, legal, enforcement, or write-off recommendations may still be required after the referral outcome is known.

AUTHORISATION

Authorised By	Position	Signature	Date
[Name]	[Position]	_____	[Date]

IMPORTANT NOTICE

This authority form is provided for commercial and administrative decision-making purposes only. ICAG does not provide legal advice, insolvency advice, financial product advice, accounting advice, taxation advice, or credit assistance. Where specialist advice is required, the debtor, client, or other relevant party should obtain advice from an appropriately qualified professional. Referral to an external provider does not guarantee recovery, repayment, settlement, restructuring, finance approval, insolvency outcome, or any specific commercial result.

CONTACT ICAG

Phone	Email	Website	Reference
[Phone Number]	[Email Address]	[Website]	[ICAG Reference]

Yours faithfully,

[Officer Name]
[Position]
Intrepid Collections & Accounts Group (ICAG)