

## **Direct Debit Authority**

1. Complete your Bank Account Name details.

1900 05/15

- 2. Fill in your Bank, Branch, Account and Suffix Number from which payments are to be made.
- 3. Complete your Worldline NZ merchant ID details.
- 4. Enter your trading name and then sign and date this Authority (please note that only cheque accounts and certain types of savings accounts are available for Direct Debit. If you are unsure about your account, please check with your bank).

1. Name of my account to be debited (acceptor)										Ir	nitia	tor's	s aut	hori	sati	on c	ode
2. Name of my bank	1	Bank	В	ranch		Ac			ount						:	Sufi	X
From the acceptor to  [insert name of acceptor's bank]  I authorise you to debit my account with the amounts of direct deb authority in accordance with this authority until further notice.  I agree that this authority is subject to:  The bank's terms and conditions that relate to my accounted.  The specific terms and conditions listed below.  Below is the information that will appear on your bank statement:  Payer Particulars  Payer Code  3. Merchant ID	its from <b>Pay</b>			ference	s World	dline N	Z w	ith th	he au	thoris	ation	n cod	le spe	cified	l on 1	this	
4. Trading name																	
Authorised signature/s									Da	ite							
Specific conditions relating to notices and disputes  I may ask my bank to reverse a direct debit up to 120 calendar days  I don't receive a written notice of the amount and date of a receive a written notice but the amount or the date of de  I may ask my bank to reverse a direct debit up to 9 months after the the authority authorised my bank to debit my account with the amount of the initiator is required to give you a written notice of the amount and the second sec	each direct of biting is diff e date the in ount of the c	debit from the ferent from the nitiator senthe direct debit.	the a	mount o	r the d	t unde	r th	ie au	thorit	y if Ia	ım no				atisfi	ed th	ıat
If the bank dishonours a direct debit but the initiator sends the direct to notify you a second time of the amount and date of the direct de		econd time v	withii	n 5 busir	iess da	ays of t	the	origi	nal di	rect d	ebit,	, the	initiat	or is ı	not r	requir	red
For bank use only  Approved	Date rece	ived		Recor	ded by	,			Cho	cked	by.			R <sub>2</sub>	nk S	Stamp	