



# Direct Debit Request

## Request and Authority to debit the account named below to pay Hindmarsh Shire Council

<b>Request and Authority to debit</b>	<p>Your Surname or company name _____</p> <p>Your Given names or ABN/ARBN _____ "you"</p> <p>request and authorise, <b>Hindmarsh Shire Council</b> User ID 509784, to arrange, through its own financial institution, a debit to your nominated account any amount <b>Hindmarsh Shire Council</b>, has deemed payable by <i>you</i>.</p> <p>This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from <i>your</i> account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.</p>
<b>Insert the name and address of financial institution at which account is held</b>	<p><b>Financial institution name</b> _____</p> <p><b>Address</b> _____</p> <p>_____</p>
<b>Insert details of account to be debited</b>	<p><b>Name/s on account</b> _____</p> <p><b>BSB number (Must be 6 Digits)</b>       _ _ _ _ _  -  _ _ _ _ _ </p> <p><b>Account number</b>                       _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ </p> <p><b>Frequency</b> weekly/fortnightly/monthly/per instalment/one occurrence only</p> <p><b>Date to Commence</b> _____</p> <p><b>Do you agree to</b>      <b>a) set amount per frequency \$</b> _____</p> <p style="padding-left: 100px;"><b><u>OR</u></b></p> <p style="padding-left: 100px;"><b>b) pay amount in full.</b></p> <p style="padding-left: 100px;"><b><u>OR</u></b></p> <p style="padding-left: 100px;"><b>c) other please specify</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<b>Acknowledgment</b>	<p>By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and <b>Hindmarsh Shire Council</b> as set out in this Request and in your Direct Debit Request Service Agreement.</p>

**\*\*Please ensure that you complete both pages of this form\*\***

<b>Insert your signature and address</b>	<p><b>Signature</b> _____ (If signing for a company, sign and print full name and capacity for signing eg. director)</p> <p><b>Address</b> _____ _____</p> <p><b>Phone</b> _____</p> <p><b>Date</b> ___ / ___ / ___    <b>Assessment Number</b> _____</p>
<b>Second account signatory (if required)</b>	<p><b>Signature</b> _____ (If signing for a company, sign and print full name and capacity for signing eg. director)</p> <p><b>Address</b> _____ _____</p> <p><b>Phone</b> _____</p> <p><b>Date</b> ___ / ___ / ___</p>