Direct Debit Form



DETAILS	
Your Name	Client Reference
Address	Contact Number
Name of Account	
Account Number BANK BRANCH	ACCOUNT NO. SUFFIX
Authorisation Code (User Number) 0 6 1 7 6 9 3	AUTHORITY TO ACCEPT DIRECT DEBITS (Not to operate as an assignment or agreement)
TO: THE BANK MANAGER	
Bank and Branch	
Address (PO Box)	
Town/City	
I/We authorise you until further notice in writing to debit my/our account with all amounts which TAILOR MADE MONEY LIMITED (hereinafter referred to as the Initiator), the registered Initiator of the above Authorisation Code, may initiate by Direct Debit. I/We acknowledge and accept that the bank accepts this authority only on the conditions listed on the reverse of this form. INFORMATION TO APPEAR ON MY/OUR BANK STATEMENT (to be completed by Initiator)	
PAYER REFERENCE	
Authorised signature/s	Authorised signature/s
Date	Date
FOR BANK USE ONLY	
	rded by Checked by Bank Stamp
CONDITIONS OF THIS AUTHORITY	
 THE INITIATOR: (a) Has agreed to give advance notice of the net amount of each Direct Debit and the due date of the debiting at least* business days before the date when the Direct Debit will be initiated. This advance notice must be provided either: (i)in writing: or (ii) by electronic mail where the Customer has provided written consent to the initiator. The advance notice will include the following message: The amount of \$	 (b) In any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account. (c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concert of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other dispute lies between me/us and the Initiator. (d) Where the Bank has used reasonable care and skill in acting in accordance with this
(initiating date)". * minimum 2 business days.	authority, the Bank accepts no responsibility or liability in respect of: - the accuracy of information about Direct Debits on Bank statements.
(b) May. Upon the relationship, which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the authority. Upon receipt of such notice the Bank may terminate this Authority as to	 Any variations between notices given by the Initiator and the amounts of Direct Debits.
 authority. Open receiptor such notice the bank may terminate this Authority is to future payments by notice in writing to me/us. THE CUSTOMER MAY: (a) At any time, terminate this Authority as to future payments by giving written notice 	(e) The Bank is not responsible for, or under any liability in respect of the Initiators failure to give notice in accordance with1(a) nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies
(b) Stop payment of any Direct Debit to be initiated under this Authority by the Initiator	between me/us and the Initiator. 4. THE BANK MAY:
by giving written notice to the Bank prior to the Direct Debit being paid by the Bank. 3. THE CUSTOMER ACKNOWLEDGES THAT:	(a) In its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this or any other Authority, cheque or draft properly executed by me/us and given to or drawn on the Bank.
(a) This Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by	(b) At any time terminate this Authority as to future payments by notice in writing to me/us.
the Bank.	(c) Charge its current fees for this service in force from time-to-time.