



DIRECT DEBIT REQUEST

Date: ____/____/____

I/We (Full Name) _____

of (Address) _____

Postcode: _____ Telephone No: _____

authorise and request the Department of Housing and Public Works (USER ID 15621) to arrange for funds to be debited from my/our account at the financial institution identified below in accordance with this request and the terms attached, which I/we agree to.

This authorisation and request will remain in force in accordance with the terms of the Service Agreement.

Privacy Notice

The Department of Housing and Public Works is collecting personal information on this form to provide you with housing assistance. To assist you with your housing needs and services, your personal information may be disclosed to partner agencies, service providers, local governments and non-governmental organisations that may be able to provide you with housing or support services. They may, to assist you with your housing needs and services, pass on the information to other partner agencies, service providers, local governments and non-governmental organisations that may be able to provide you with housing or support services. Limited personal information may be used for housing related research, policy or planning functions. Unless authorised or required by law, your personal information will not otherwise be disclosed to any other third party without your consent. More information about the Department's privacy policy is available on our website at www.hpw.qld.gov.au.

Postcode _____

Insert Full Name & Full Address of Bank /
Credit Union / Building Society (*Must be
sufficiently legible for Postal Purposes*).

THE SCHEDULE

(N.B. - DIRECT DEBITING IS NOT AVAILABLE ON THE FULL RANGE OF ACCOUNTS e.g: PASSBOOK ACCOUNTS. IF IN DOUBT, PLEASE REFER TO YOUR BANK/FINANCIAL INSTITUTIONS).

Bank/State/Branch Number

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Name of Account _____

Account Number _____

Departmental Reference Number _____

Payment frequency (please tick) Weekly () Fortnightly () Date next pay deposited
...../...../20.....

OFFICE USE ONLY

Date Received / /

Date Processed / /

Signature/s

Note: the person/s signing this form must be named on the account detailed above or, if not named on the account, must supply evidence they are a signatory.

Please return the completed form to your nearest Housing Service Centre

DIRECT DEBIT REQUEST SERVICE AGREEMENT

1. **Notification of Amount and Drawing date** – The Department of Housing and Public Works will debit your account for the amounts and on the dates you have authorised in the **Direct Debit Request**.
2. **Variation of Terms by The Department of Housing and Public Works** – The Department of Housing and Public Works will provide you with at least **14** days notice of any proposed variation to existing arrangements.
3. **Variation of Terms by Department of Housing and Public Works** – If you contact the Department of Housing and Public Works at least 2 days before any agreed drawing takes effect, requesting deferment of or alteration to existing arrangements, the Department of Housing and Public Works will undertake to perform this request before the next draw takes effect. If this is not possible, the Department of Housing and Public Works will tell you why.
4. **Stopping Debits** – If you wish to cancel a **Direct Debit Request** or stop a particular debit, we request you provide the Department of Housing and Public Works at least 2 days prior notice. You should contact your local Housing Service Centre.
5. **Disputes** – If you dispute any debit to your account pursuant to the **Direct Debit Request**, you should contact the Department of Housing and Public Works. Your query should be in writing setting out your details and your dispute. If you prefer, you can telephone the Department of Housing and Public Works to discuss the problem before lodging a written dispute. The Department of Housing and Public Works will promptly investigate any written dispute, and give you a response within a reasonable time.
6. **Check That Your Account Allows Direct Debits** – Direct debiting may not be available on all accounts. Please check with your Financial Institution if in any doubt, or to confirm account information to complete the **Direct Debit Request**.
7. **Available Funds** – It is your responsibility to have sufficient funds available in your account on the due date to permit debits to be drawn in accordance with your **Direct Debit Request**. Your Financial Institution may charge you a dishonour fee if the debit is refused due to insufficient funds.
8. **Payments due on non business days** – If a day nominated for a debit on the **Direct Debit Request** is not a business day in the place of lodgement (for example, a weekend or public holiday) your account will be debited on the next business day. Enquiries as to when the debit will be processed should be directed to your financial institution.
9. **Returned Debits** – If your financial institution does not pay a debit requested in accordance with the **Direct Debit Request**, you must make alternative arrangements to ensure that the Department of Housing and Public Works is paid that amount immediately. Should this occur you will be required to pay a dishonour fee to the Department of Housing and Public Works. The fee is currently \$14.55, but may be subject to change.
10. **Privacy** – The information you provide on the **Direct Debit Request** will only be used for the purpose intended, the Department of Housing and Public Works will take reasonable precautions to maintain the confidentiality of your records and account details. Note, however, that the Department of Housing and Public Works' financial institution may require such information to be provided in connection with a claim made on it relating to an alleged incorrect or wrongful debit.



DEDUCTION DETAILS

For Bank Direct Debit

This form is used to capture details regarding the frequency, day and amounts for deduction from your account held at a financial institution.

This form is not an authority to commence deductions or alter bank account details and it will not be forwarded to your financial institution. It will be held on your file at your local Housing Service Centre.

Tenant's name: _____

Your Rental Agreement number: _____

Type of payment	Amount (\$)
Rent	
Rent arrears repayment	
Maintenance/other repayments	
Extra repayments	

Payment Frequency (Please Tick) Weekly ☐ Fortnightly ☐

Payment day (Please tick) Monday ☐ Tuesday ☐ Wednesday ☐
Thursday ☐ Friday ☐

Date you would like direct debit deductions to commence: ____/____/____

SIGNATURE/S: _____

OFFICE USE ONLY

Date received ____/____/____

Date entered ____/____/____

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