

DIRECT DEBIT REQUEST (DDR)

Direct Debit Request

I/We request and authorise you, Land and Property Information (User ID:252511), to arrange for funds to be debited from my/our nominated account at the financial institution shown below.

Name						
Customer No.						
Address						
			Postcode			
Account Signatories(s)						
	Where account is held in joint names, both signatures are required					
Date						
Name and Branch of Financial Institution						
BSB No.						
Account Number						
Account Name						
Contact Details:						
Name:		Position:				
Phone No: Fax No.		Email:				
Name:		Position:				
Phone No:	Fax No.	Email:				

I acknowledge that this request will have immediate effect following the processing of the Direct Debit Agreement and this Request. Please debit all fees and charges incurred from this date from the above account.

I/We undersigned am authorised to enter and execute this agreement.

Signature	Signature		
Print Name	Print Name		
Position	Position		
Date	Date		

OFFICE USE ONLY						
Reviewed and approved -Titling & Registry Services						
Name and Signature Date						
2. Completeness of Form						
3. Entered into SAP						
ENTERED	Officer Name	Signature	 Date			
CHECKED	Officer Name	 Signature	 Date			

Please return this form to:

Land and Property Information Finance Branch PO Box 15 Sydney NSW 2001

For enquiries regarding completion of this form please contact:

Account inquiry Finance Branch T: 9228 6700

E: account.inquiry@lpi.nsw.gov.au