DIRECT DEBIT EASIPAY

WAIROA DISTRICT COUNCIL

Queen St, PO Box 54 Wairoa 4160

Please attach deposit slip to this form

Authority to accept Direct Debits (not to operate as an assignment or agreement)	Authorisation Code	**Account number** Valuation /Customer /Owner number 1. 2. 3.
	2 7 0 1 0 0 3	

Name (of account holder):_____

Bank account from which payments to be made:

Name of Bank:_____**Branch**:_____

Payment options:☐ weekly ☐ fortnightly ☐ monthly ☐ quarterly ☐ annually

Start date:

/ / (Mon/Tue/Wed)

Amount: $_____ (if you fill no amount in we will calculate the correct amount for you)

I/we authorise you until further notice in writing to debit my/our account with you in all amounts which Wairoa District Council (hereinafter referred to as the Initiator) of the above Authorisation Code, may initiate by Direct Debit. I/we acknowledge that the bank accepts this authority only on conditions listed below on this form
Information to appear your bank statement:

Payer Particulars	Payer Code	Payer reference
	W D C	

Signature(s): (bank account holder to complete**)**

_____**Date**: / /

Name(s) on Council Account

Daytime phone:_____

Mobile phone:_____

Email: _____

Conditions of this Authority to accept Direct Debits:

1. The Initiator (Wairoa District Council):
   (a) Undertakes to give written notice to the Acceptor of the commencement date, frequency and amount at least 10 calendar days before the first Direct Debit is drawn (but not more than 2 calendar months).In the event any subsequent change to the frequency or amount of the Direct Debits, the Initiator has agreed to give written advance notice at least 21 days before the change comes into effect.
   (b) May, upon the relationship which gave rise to this Authority being terminated, give notice that no further Direct Debits are to be initiated under the Authority.
2. The Customer (you) may: At any time, terminate this Authority as to future payments by giving written notice of termination to the Initiator.
3. The Customer (you) acknowledges that:
   (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 the Bank.
   (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 in my/our account shall not be the concern of the bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other disputes lie between me/us and the Initiator.
   (d) Where the Bank has used reasonable care and skill in acting in accordance with this authority, the bank accepts no responsibility or liability for: the accuracy of information about Direct Debits on Bank Statements; any variations between notices given by the Initiator and the amounts of Direct Debits.
   (e) The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give written advance notice correctly nor for the non-receipt of notice by me/us for any reason whatsoever. In any such situation that dispute lies between me/us and the Initiator.
   (f) Notice given by the Initiator in terms of clause 1(a) to the debtor responsible for the payment shall be effective. Any communication necessary because the debtor responsible for payment is a person other than me/us is a matter between me/us and the debtor concerned.
4. The Bank may:
   (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.
   (b) At any time terminate this authority as to future payments by notice in writing to me/us and to the Initiator.
   (c) Charge its current fees for this service in force from time-to-time.

Office use only	Processed by:	Date:	Confirmation letter sent: