



Direct Debit Request

Customers' Authority	I/We	Name of Customer(s) giving the DDR	
		<input type="text"/>	
	authorise you	Name of Debit User	APCA User ID Number
		<input type="text" value="NAZARETH COLLEGE"/>	<input type="text" value="063 253"/>

To arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS).
This authorisation is to remain in force in accordance with the terms described in Service Agreement.

<input type="text"/>	<input type="text"/>
Signature:	Date:
<input type="text"/>	<input type="text"/>
Signature:	Date:

Details of the Account to be Debited (All details must be supplied)	Name of Financial Institution
	<input type="text"/>
	Account Name
	<input type="text"/>

BSB number	-		-	Account number
<input type="text"/>		<input type="text"/>		<input type="text"/>

OR CREDIT CARD

Card Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Expiry date:	<input type="text"/>	/	<input type="text"/>	Cardholder's signature: <input type="text"/>

I/We request that you debit my/our account in accordance with our Agreement until further notice in writing.

Agreed amount to be debited	\$ <input type="text"/>	Frequency of debit	<input type="text"/>
First payment date	<input type="text"/>	Final payment date (optional)	<input type="text"/>
	/ /		/ /

Optional inclusion on the DDR or the Customer Service Agreement

I/We authorise the following:

- The Debit User to verify the details of the abovementioned account with my/our Financial Institution
- The Financial Institution to release information allowing the Debit User to verify the abovementioned account details.

Signed by the Customer(s)	<input type="text"/>	<input type="text"/>
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Office Use Accepted by: _____ Date: ____/____/____

Direct Debit Request Service Agreement

1. The customer will be advised 14 days in advance of any changes to the Direct Debit arrangements;
2. For all matters related to the Direct Debit arrangements, the customer will need to:
 - Call (on (03) 9790 8104) or visit the accounts office during school hours
 - or**
 - Send written correspondence to the College outlining the request
 - and**
 - Please allow for a minimum of 7 days for the arrangement to take effect.
3. The customer should be aware that:
 - Direct Debiting through BECS is not available on all accounts;
 - Account details should be checked against a recent statement from it's Financial Institution, if you are in doubt, you should check with your bank before completing the drawing authority.
 - Should your bank account details change, you are responsible to advise the College.
4. It is your responsibility to ensure sufficient clear funds are in the nominated debiting account when the payments are to be drawn.
5. If the due date falls on a non-working day or public holiday, the payment will be processed on the *next* working day. If the customer is in any doubt, please refer to point 2 for further clarification.
6. For returned unpaid transactions, the following procedures will apply:
 - The unpaid transaction will be debited to your account and a repayment will be requested.Fees and Charges (if applicable):
 - Any fees or charges incurred by us as a result of an unpaid transaction will be charged to you.
7. All customer records and account details will be kept private and confidential to be disclosed only at the request of the customer or Financial Institution in connection with a claim made to an alleged incorrect or wrongful debit.