

Direct Debit Authority

Name of your organisation		
Site name (if applicable)		
Site address (if applicable)		
Apartment/unit	Contact phone number	



Direct Debit Authority

My account to be debited (acceptor)	Initiator's authorisation code 0 2 3 1 6 3 8
Name of my bank	
	Approved
Bank Branch Account Suffix	3163 03/18

From the acceptor to my bank

I authorise you to debit my account with the amounts of direct debit instructions received from *EMP Limited* (the 'Initiator') with the authorisation code specified on this authority and in accordance with this authority until further notice from me.

I agree that this authority is subject to:

- My bank's terms and conditions that relate to my account, and
- The terms and conditions listed below.

Authorised signature/s		Date			
			/	/	

Specific conditions relating to notices and disputes

- 1. I agree that the Initiator must give me at least 10 days' prior notice of each direct debit, including the first direct debit in a series.
- 2. Changes to the amounts or dates of a series of direct debits require 30 days' prior notice to me.
- 3. I can also agree with the Initiator to receive a same day notice for direct debits specifically requested by me.
- 4. All notices must be in writing, but can be delivered electronically, if I have agreed that with the Initiator.
- 5. I can also ask you to reverse a direct debit up to 120 days after the direct debit if:
 - I didn't receive proper notice of the amount and date of the direct debit, or
 - I received notice but the amount or date of the direct debit is different from the amount or date on the notice.
- 6. If you dishonour a direct debit but the Initiator retries it within 5 business days of the original direct debit, I understand that the Initiator doesn't need to notify me again about that direct debit.

For Bank Use Only	Date Received:	Recorded by:	Checked by:	Bank Stamp
	Original – Retain at B Copy – Forward to Ini			