

Authority for Automatic Payments

Not to operate as an assignment or an agreement Payer Details To the manager **Important - Please Tick** This is a new authority, or Name of Bank As from / / (first payment date), this Branch authority replaces existing authorities for Name of Account in favour of the same payee. **Account Details** On behalf of (name if other than payer) Bank/Branch/Account Number/Suffix Details to appear on my/our bank statement: Particulars (max 12 characters) Code (Max 12 characters) Reference(max 12 characters) Accounts Online **Frequency and Amount** First payment date Last payment date Until further notice (tick) 10/ OR \square **Monthly** Frequency: □ Weekly □ Fortnightly ☐ Four Weekly or Specify other period **Fixed Amount** Amount in words Complete if applicable (one option only): Variable amount o First o Last Amount in words **Payee Details** Pay to the credit of: Name of Bank Westpac **Porirua** Branch Name of account **Accounts Online** 0 0 3 5 Bank/Branch/Account Number/Suffix Details to appear on payee's bank statement: Particulars (max 12 characters) Code (Max 12 characters) Reference(max 12 characters) **Conditions** The Bank will use reasonable care and skill to I/We undertake to advise the Bank immediately This authority may be terminated or reduced by of any information about payments shown on bank statements which is incorrect. This authority is subject to any arrangement now the Bank or the payee without notice to me/us in respect of the payment detailed above.

This authority will remain in force and effect in give effect to directions given to it in the authority Where the directions given in this authority have respect of all payments made in good faith notwithstanding my/our death or bankruptcy or any revocation of this authority unil notice of been given by me/us for the purpose of a business, the Bank accepts those directions or hereafter subsisting between myself/ourselves and the Bank in relation to my/our account. The bank may in its absolute discretion without any responsibility or liability for any refusal or omission to make all or any of the conclusively determine the order or priority of my/our death or bankruptcy or other revocation payments or for late payment or for any payment by it of any monies pursuant to this or is received by the Bank. omissions to follow such directions.
The Bank accepts no responsibility or liability for any other authority or cheque which I/We may now or hereafter give to the Bank or draw on All current Bank and Government charges for this service in force from time to time are to be the accuracy of the information contained in the my/our account. debited to my/our account. payment information fields on this authority. The Bank may in its absolute discretion refuse to make any one or more payments pursuant to this authority where there is insufficient funds available in my/our account. **Authorisation** 1 Please make this automatic payment as detailed by debiting my/our account. 2 I/We understand and accept that the Bank accepts this authority only on the conditions above. Name of Account (customer to complete) Customer's Signature Contact ph Date Customer's Signature Contact ph Date **Bank Use** Date Received Recorded by Checked by

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