Accounts Online Limited PO Box 83104 Johnsonville 6440 WELLINGTON

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ACCOUNT INFORMATION		
Name of Account	AUTHORITY TO ACCEPT DIRECT DEBITS	
Customer (Acceptor) to complete bank/branch number and account number and suffix of account to be debited.	(not to operate as an assignment or agreement)	
Bank Branch Number Account Number Suffix	Authorisation Code 0 3 1 9 2 6 4 (User Number)	
TO: The Manager Bank Name PO Box Town/City	 Date / /	
I/We authorise you until further notice in writing to debit my/our account with you all amou		
Accounts Online Limited		
(hereinafter referred to as the Initiator) the registered Initiator of the above Authorisation Code, may initiate by Direct Debit.		
I/We acknowledge and accept that the bank accepts this authority only upon the conditions listed on the reverse of this form.		
INFORMATION TO APPEAR ON MY/OUR BANK STATEMENT		
Payer Particulars Payer Code Payer Reference Image: Code		
Name of Account (Customer to complete) Authorised Signatures SIGNATURE	SIGNATURE	
1926 Date Received Recorded By Checked 11/10. Original - Retain at Branch Copy - Forward to Initiator if requested	d By BANK STAMP	
CONDITIONS OF THIS AUTHORITY TO ACCEPT DIRECT DEBITS the Initiator through the Initiator's Bank, PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account		
 The Initiator: (a) Has agreed to give advance notice of the net amount of each Direct Debit and the dud ate of the debiting at least 10 calendar days before (but not more than 2 calendar months) the date when the Direct Debit will be initiated. This advance notice must be provided either: 		
 (c) termination to the Bank and to the linitiator. (b) Stop payment of any Direct Debit to be initiated under this authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank. (c) Where a variation to the amount agreed between the Initiator and the Customer from time to be direct debited has been made without notice being given in terms of 	ion conclusively determine the order of priority payment by it of any is or any other authority, cheque or draft properly executed by me/us on the Bank. this authority as to future payments by notice in writing to me/us. es for this service in force from time-to-time.	