

Direct Debit Authority

Return to: Central Otago District Council, PO Box 122, Alexandra, 9320



Your payment options - please tick as required

Weekly <input type="checkbox"/> <i>Rates Only. Available on Thursdays Only</i> Start date:	Fortnightly <input type="checkbox"/> <i>Rates Only. Available on Thursdays Only</i> Start date:	Monthly <input type="checkbox"/> <i>Rates & Debtors. 20th of the Month</i> 20 th of month 12 x year	Quarterly <input type="checkbox"/> <i>Rates only - Last day for payment without penalty</i> 20 th of month 4 x year	Annual <input type="checkbox"/> <i>Rates only - 20th of August</i> 20 th of August only	WATER <input type="checkbox"/> Due date on invoice
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Valuation Number: <i>10 digit account number beginning with 28...</i>	Water Account no(s): <i>5 digit number - If applicable</i>	Location of Property:
2 8		
2 8		
2 8		
2 8		

My account to be debited (acceptor)

Name of my bank:

Bank	Branch	Account	Suffix

Initiator's authorisation code

0	2	0	4	1	3	8
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Approved

nnnn | mm/yy

From the acceptor to my bank:

I authorise you to debit my account with the amounts of direct debit instructions received from Central Otago District Council (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.

Name of Ratepayer:	Daytime contact number:
Ratepayer postal address:	
Email address:	

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.
- 7) I will notify Central Otago District council if/when I want this direct debit authority to cease.

For Bank Use Only	BANK STAMP						
<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">Date Received:</td> <td style="width: 33%;">Recorded by:</td> <td style="width: 33%;">Checked by:</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>	Date Received:	Recorded by:	Checked by:				
Date Received:	Recorded by:	Checked by:					
Original – Retain at Branch Copy – Forward to Initiator if requested							