# **Direct Debit Form**



Medical Protection Society Limited, PO Box 13015, Johnsonville, Wellington. Phone 0800 225 56677. Facsimile (04) 477 0109.

Original – retain at branch.

Duplicate - forward to initiator if requested.

Reference Number			Authority to accept Direct Debits (Not to operate as an assignment
Membership Number	(Tick One)	Monthly Yearly	Authorisation Code  0 6 1 8 4 4 6
Name of Bank Account Holder	(		
Customer to complete bank/branch n  Bank Branch Account num		suffix of account to be d	Date dd-mm-yyyy
Name of Bank and Branch			
I/We authorise you until further notice to debit my/our account with all amounts which Medical Assurance Society, acting on behalf of THE MEDICAL PROTECTION SOCIETY the registered Initiator of the Authorisation Code above, 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.			
This information will appear on your ba	ank statement:		
Particulars	Payer Code		
M P S S U B			
Authorised signature/s			Date dd-mm-yyyy
Authorised signature/s			Oate dd-mm-yyyy
Return to Advisor			
For bank use only			
Approved Date rece 1844 09 2006	Recorded by	Checked by	Bank stamp

## **Conditions of this Authority to Accept Direct Debits**

#### 1. The initiator:

- a) Undertakes to give written notice to the Acceptor of the commencement date, frequency and amount at least 10 calendar days before the first Direct Debit is drawn (but not more than 2 calendar months). This notice will be provided either:
  - i) in writing: or
  - ii) by electronic mail where the Customer has provided prior written consent to the Initior.

Where the Direct Debit system is used for the collection of payments which are regular as to frequency, but variable as to amounts, the Initiator undertakes to provide the Acceptor with a schedule detailing each payment amount andeach payment date.

In the event of any subsequent change to the frequency or amount of the Direct Debits, the Initiator has agreed to give advance notice at least 30 days before changes come into effect. This notice must be provided either:

- iii) in writing; or
- iv) by electronic mail where the Customer has provided prior written consent to the Initior.
- b) May, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.

# 2. The Customer may:

- a) At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator.
- 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 time to be direct debited has been made without notice being given in terms of clause 1 a) above, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of the Direct Debit back to the Initiator through the Initiators Bank, PROVIDED such request is not made more than 120 days from the date when the Direct Debit was debited to my/our account.

# 3. The Customer acknowledges that:

- a) This Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.
- b) In any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
- c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other dispute lies between me/us and the Initiator.
- d) Where the Bank has used reasonable care and skill in acting in accordance with this Authority, the Bank accepts no responsibility or liability in respect of:
  - accuracy of information about Direct Debits on Bank Statements.
  - any variations between notices given by the Initiator and the amounts of Direct Debits.
- e) The Bank is not responsible for, or under any liability in respect of the Initiators failure to give written advance notice correctly nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.
- f) Notice given by the Initiator in terms of clause 1 a) to the debtor responsible for the payment shall be effective. Any communication necessary because the debtor responsible for payment is a person other than me/us is a matter between me/us and the debtor concerned.

# 4. The Bank may:

- a) In its absolute discretion conclusively determine the order of priority payment by it of any monies pursuant to this or any other Authority, cheque or draft properly executed by me/us and given to or drawn on the Bank.
- b) At any time terminate this Authority as to future payments by notice in writing to me/us.
- c) Charge its current fees for this service in force from time-to-time.