



Office Use Only	
New Application:	<input type="checkbox"/>
Amended Application:	<input type="checkbox"/>
Amount Change:	<input type="checkbox"/>
Bank Details Change:	<input type="checkbox"/>
Other:	<input type="checkbox"/>

**Direct Debit Request
Customer Authority**

I/We

Name:	
Address:	
Address:	
Work Hours Contact Phone No.	

Authorise Dubbo Regional Council

to arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS).

This authorisation is to remain in force in accordance with the terms described in the Dubbo Regional Council Direct Debiting Service Agreement (please see the reverse of this form).

Signature
Date / /

Signature

Details of the Account to be Debited	Name of Financial Institution	
	<input type="text"/>	
	Branch Name:	<input type="text"/>
	Full Name of Account	<input type="text"/>
BSB NO:	<input type="text"/> ---	ACCOUNT NO: <input type="text"/>

Payment Details:

This payment is for Rates and Charges applied on the property known as:

Insert property address

Assessment No:

Please tick the Appropriate box	<input type="checkbox"/>	<u>For payment of Instalment Amounts as they fall due</u> I/We request that Dubbo Regional Council debit my/our account in accordance with our Agreement
	<input type="checkbox"/>	<u>For Periodic Payments</u> I/We request that Dubbo Regional Council debit my/our account in accordance with our Agreement and subject to one or more of the following conditions:
		OR
<u>PROCESSING TIMES</u> Weekly – Thu/Fri only F/Nightly – Thu/Fri only Monthly – 15 th /EOM only	Frequency of payment	<input type="text"/> Weekly / Fortnightly / Monthly
	First payment date	<input type="text"/>
	Payment Amount	\$ <input type="text"/> . <input type="text"/>
		Do Not Allow Credit Payment <input type="checkbox"/>

Direct Debit Service Agreement

Between

The Customer

AND

Dubbo Regional Council, the Debit User

I/ We understand that, the Debit User will issue to the customer an instalment notice at least 30 days prior to the due date for each Rates and Charges Instalment.

This notice will advise the customer that, on the due date, the Total Amount Due as shown on the instalment notice will be deducted from the account that you have nominated. If the due date on the notice is not a banking day, the funds will be taken from the account on the next banking day.

I/We, the customer, will ensure that sufficient funds are available in this account to permit the payment of this debit item.

I/We understand that, if there are insufficient funds in the account and the Debit Item is returned unpaid, the Debit User will apply any fees which the banking institution has charged in relation to the returned Debit Item, and in addition, will charge, to the customer, a returned direct debit fee will be applied. These fees will be added to the next rates and charges assessment notice.

The Debit User will notify the customer at least 14 days in advance, of any variance to the debit arrangement.

I/We will notify the Debit User if the debit arrangement is to be deferred, or altered in any way or of cancellation of the debit agreement at least 10 working days before payment is due. This notification must be referred in writing to the Debit User, or by means of completing the required Cancellation of Debit Agreement form, available from Dubbo Regional Council.

If, as the customer, you wish to dispute any Debit Item, please direct your inquiry to the Debit User. If the dispute cannot be resolved, it may be necessary for you to direct the query to the nominated Financial Institution.

If you dispute any amount billed, please notify the debit user at least 2 working days prior to the payment date. Any disputed amount will not be debited to your account until such time as the dispute is resolved.

I/We, the customer, have checked the account details given on the front side of this form against a recent statement issued by the nominated Financial Institution and verify these to be correct.

The Debit User will ensure that all information supplied in accordance with this agreement is Confidential and will not disclose this information to any other party.

I/We understand, whoever, that it may be necessary for the Debit User to provide my/our account details to the nominated Financial Institution in connection with any dispute being made on a debit item relating to this agreement.

I/We authorise the following:

1. The Debit User to verify the details of the nominated account with my/our Financial Institution.
2. The Financial Institution to release information allowing the Debit User to verify the abovementioned account details.

Signed by the Customer

Date / /

NOTE:

DIRECT DEBITING IS NOT AVAILABLE ON THE FULL RANGE OF BANK ACCOUNTS. IF IN DOUBT, PLEASE CHECK WITH YOUR BANK OR FINANCIAL INSTITUTION.

Note to applicants

The personal information that Council is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998.

The intended recipients of the personal information are the officers of Council.

Should you provide your address or any other contact details, Council will not record those details for any other purpose other than to respond to your application.