





ACN 096 902 813 Authorised Representative under AFSL 315388

DIRECT DEBIT REQUEST

PH: 02 8805 4720 ABN/ACN: 89 401 152 271

NEW CUSTOMER FORM

DDR Service Agreement (Ver 1.13)

YOUR DETAILS	Please complete this form using a BLACK PEN. * Inc	icates a MANDATORY FIELD	
Business:	POLICE CITIZENS YOUTH CLUBS NSW LTD	ABN/ACN: 89 401 152 271	101-114-391
Customer Reference:			
* Surname:		*Given Name:	
*Mobile #:			
*Email:			
* Address:			
* Suburb:		*State: * Postcode:	
DEBIT ARRANGEMENT OFFICE USE ONLY Including details and associated fees/charges detailed below and/or the total amount for the specified period for this and as per any other subsequent agreements or amendments between me/us and the Business and/or Ezidebit			
Once Only Debi	t On Date: / / / / / D D M M Y	Debit this amount: \$	
Regular Debits	Starting on Date: / / /	Debit this amount: \$	
Frequency: Fortnightly			
Duration: Until Further Notice			
Administration Fee(once only) N/A up to:	Bank Account Transaction \$0.35 Fee:	Credit Card Transaction Fee: VISA/Mastercard: 1.90%	
Fee(once only) N/A up to:	Transaction \$0.35	Transaction VISA/Mastercard: 1.90%	
Fee(once only) N/A up to:	Transaction \$0.35 Fee: AYMENT METHOD	Transaction VISA/Mastercard: 1.90%	
Fee(once only) N/A up to: CHOOSE YOUR F	Transaction \$0.35 Fee: AYMENT METHOD	Transaction VISA/Mastercard: 1.90%	
Fee(once only) N/A up to: CHOOSE YOUR F Debit from Cr	Transaction \$0.35 Fee: AYMENT METHOD edit Card	Transaction Fee:	y Date: /
CHOOSE YOUR F Debit from Cr	Transaction \$0.35 Fee: AYMENT METHOD edit Card	Transaction Fee:	
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Fee(once only) N/A up to: CHOOSE YOUR F Debit from Cr VISA Card Number: Name of Cardholder: By sig Debit from Ba Financial Institution: BSB Number: Account Holde Name: I/We authorisation in this Requestions.	Transaction Fee: AYMENT METHOD edit Card MasterCard MasterCard MasterCard Ining this form, I/we authorise Ezidebit Pty Ltd ACN 096 902 813, actin ank, Building Society or Credit Union Account r e Ezidebit Pty Ltd ACN 096 902 813 (User ID No 342190, 342191, 428 System (BECS) in list remains in force in accordance with the terms and conditions of the est is true and correct. I/We acknowledge that my/our personal inform	Transaction Fee: Expire g as Direct Debit Agent on instruction from the Business, to debit payme Branch: Account Number:	M M Y Y ents from my Credit Card. through the Bulk Electronic Clearing gree to the same. I/We declare that the

DDR SERVICE AGREEMENT (Ver 1.13)

DDR Service Agreement (Ver 1.13)

Please retain a copy for your records. This Direct Debit Request Service Agreement (**Agreement**) forms part of the terms and conditions of your Direct Debit Request (**DDR**).

Debiting Your Account

- 1. By agreeing to the DDR you authorise Ezidebit Pty Ltd ACN 096 902 813 (Direct Debit User ID number 342190, 342191, 428198) (referred to as **Ezidebit**) to make debits to your nominated account.
- 2. The debit will be processed on the next business day after the direct debit date if:
 - (a) a payment request is received by Ezidebit after Ezidebit's usual cut off time, being 3:00pm Qld time, Monday to Friday;
 - (b) there is a public or bank holiday on the day when the debit transaction is due to be processed or on any of the following days until the debit is processed.
- 3. You authorise Ezidebit to attempt to re-debit any unsuccessful payments. You will also be responsible for any fees and charges applied by your financial institution for each unsuccessful debit attempt together with any collection fees, including but not limited to any solicitor fees and/or collection agent fee as may be incurred by Ezidebit.
- 4. Ezidebit may charge you certain fees (including setup, variation, SMS or processing fees) where applicable under your debit arrangement.

Your Responsibilities

- 5. It is your responsibility to:
 - (a) Ensure that your nominated account can accept direct debits;
 - (b) Ensure that the details on the DDR are correct, and the bank account has been verified against a recent bank statement;
 - (c) Ensure that all authorised signatories nominated on the financial institution account to be debited authorise the DDR;
- (d) Ensure that there are sufficient cleared funds in the nominated account, as a failed payment fee may be charged by Ezidebit if a debit is returned by your financial institution as unpaid;
- (e) Advise immediately if the nominated account is transferred or closed or your account details change;
- (f) Arrange a suitable payment method if Ezidebit or the Business cancels the drawing arrangements.

Cancelling or Changing Direct Debits

- 6. Subject to the terms and conditions of your agreement with the Business, you may cancel, alter or defer the debit arrangement by contacting the Business a reasonable time before the date that the drawing is to be made. If the stop or cancellation is a result of the Debit User's variation to the terms, no penalty should be imposed.
- 7. You authorised Ezidebit to vary the amount of the payments from time to time upon receiving instructions from the Business of a variation provided for within your agreement with the Business. In all other cases, changes to the amounts or dates of a series of direct debits require 30 days' prior notice.
- 8. If you believe that there has been an error in debiting your account, you should notify the Business as soon as possible. The Business will notify you of its determination and the amount of any adjustment that will be made to your nominated account (if any). Upon receiving instructions from the Business, Ezidebit will arrange for your financial institution to adjust your nominated account by the applicable amount (if any). Alternatively, you can also contact your financial institution.
- 9. You agree that Ezidebit will not be liable for any disputed transactions resulting from the supply or non-supply of goods and/or services by the Business and that all disputes will be directed to the Business (as Ezidebit is acting only as an agent for the Business).

Confidentiality

10. We will keep your account details and direct debit records confidential in accordance with Ezidebit's Privacy Policy, except where the disclosure of certain information to your financial institution is necessary to enable us to act in accordance with your drawing arrangements. We may disclose the information in the event of an alleged incorrect or wrongful debit, in relation to a claim, or otherwise as required by law.

Contact

If you wish to contact Ezidebit about anything relating to this Agreement, you should contact:

Ezidebit

PO Box 3327, Newstead, QLD 4006 Ph: 1300 763 256 Email: support@ezidebit.com.au https://www.ezidebit.com/en-au/contact