



Save yourself Time & Money



PAY YOUR RATES ACCOUNT BY DIRECT DEBIT

With the aim of making it easier to pay your property's rates account, Horowhenua District Council offers you the option to pay by direct debit

Direct Debit is a simple, convenient and reliable method of making payments whereby you authorise your bank to pay quarterly your property's rates direct from your bank account.

Direct Debit has the support of all banks and is regulated by a very strict code of conduct agreed to by the banks themselves.

You are in complete control of your payments as you are advised in advance of the amount and payment due dates. This allows you to query an amount, stop a payment or withdraw from the arrangement prior to the direct debit being processed. Should you wish to stop a payment or cease an arrangement we only require written notification from you two business days prior to the last due for payment of the due instalment.

Direct Debit will save you time and money with these benefits:

- ❖ *No more cheques to write and post*
- ❖ *You never miss your payments - so no chance of any penalties*
- ❖ *No more stamps, envelopes or queues*
- ❖ *No need to remember to post your payment*
- ❖ *Your money stays in your account right until the last day*
- ❖ *Automatic adjustment of direct debit amount each year as your annual rates change*

All you need to do is complete the attached Direct Debit Authority Form and return it with a deposit slip for your bank account to Horowhenua District Council, Private Bag 4002, Levin

If you have any queries or require assistance with the form, telephone Customer Services on 06 366 0999 any time between Monday, Tuesday, Thursday, Friday 9.00am - 5.00pm and Wednesday 9.30am - 5.00pm. Closed Public Holidays.

HOW DO YOU FILL IN THE FORM?

Just fill in the shaded boxes and return to:
Customer Service Centre, Horowhenua District Council
126-148 Oxford Street LEVIN or Private Bag 4002, LEVIN 5540.

*If you have any difficulty filling in the form please contact
our Customer Service Centre or Rates Office 06 366 0999*



Please arrange: Fortnightly Tuesday or Thursday
Monthly
Quarterly Payments from my account.
Start Date: _____

BANK DETAILS

NAME:
(Of Bank Account Holder)

BANK ACCOUNT FROM WHICH PAYMENTS TO BE MADE:

Bank Branch No. Account Number Suffix

Please attach a deposit slip for your bank account

TO: THE BANK MANAGER,

BANK
BRANCH
TOWN/CITY

I/We authorise you until further notice in writing to debit my/our account with you all amounts which

HOROWHENUA DISTRICT COUNCIL

(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 (To be completed by the Initiator)

PAYER PARTICULARS PAYER CODE PAYER REFERENCE

YOUR SIGNATURE(S)

DATE ____/____/____

Approved
0135
07 1993

Date: Received Recorded By: Checked By:

BANK STAMP

INSTRUCTIONS

Fill in all the shaded sections.

Copy these from your Rates Assessment

This is the name and number of the bank account you wish payments to be made from.

This is the name and branch of your bank and where it is located.

This section gives your bank the authority to allow Council to debit your account with your rates.

Sign the form and date it.

Send the form to the Council who will lodge it with your Bank.



HOROWHENUA DISTRICT COUNCIL

126-148 Oxford Street
Private Bag 4002, Levin 5540
Telephone 06 366 0999
Facsimile 06 366 0977
www.horowhenua.govt.nz

DIRECT DEBIT AUTHORITY

Assessment Number:

Valuation Number:

Location of Property:

(IF MORE THAN ONE PROPERTY BEING PAID FOR PLEASE ATTACH ADDITIONAL ADDRESSES)

Ratepayer Name:

Ph ()

Alternate Name:

Ph ()

Please arrange: Fortnightly Tuesday or Thursday
Monthly
Quarterly Payments from my account.

BANK DETAILS

Start Date: _____

NAME:

(Of Bank Account Holder)

AUTHORITY TO ACCEPT

DIRECT DEBITS

(Not to operate as an assignment or agreement)

BANK ACCOUNT FROM WHICH PAYMENTS TO BE MADE:

Bank

Branch No.

Account Number

Suffix

AUTHORISATION CODE

0 3 0 3 9 2 2

Please attach a deposit slip for your bank account

TO: THE BANK MANAGER,

BANK

BRANCH

TOWN/CITY

I/We authorise you until further notice in writing to debit my/our account with you all amounts which

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PAYER PARTICULARS

PAYER CODE

PAYER REFERENCE

YOUR SIGNATURE(S)

DATE

_____/_____/_____

Approved 0392
02/00

Date: Received	Recorded By:	Checked By:
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BANK
STAMP

CONDITIONS OF THIS AUTHORITY TO ACCEPT DIRECT DEBITS

1. The Initiator:

- (a) Undertakes to give notice to the Acceptor of the commencement date, frequency and amount at least 10 calendar days before the first Direct Debit is drawn (but no more than 2 calendar months). This notice will be provided either:
- in writing; or
 - by electronic mail where the Customer has provided prior written consent to the Initiator.
- 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 and each 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 of at least 30 days before changes come into effect. This notice must be provided either:

- in writing; or
- by electronic mail where the Customer has provided prior written consent to the Initiator.

OR

- (a) Has agreed to give advance notice of the net amount of each Direct Debit and the due date 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:
- in writing; or
 - by electronic mail where the Customer has provided prior written consent to the Initiator.

The advance notice will include the following message:-

'Unless advice to the contrary is received from you by (date*), the amount of \$_____, will be direct debited to your Bank account on (initiating date)'

*This date will be at least two (2) days prior to the initiating date to allow for amendment of Direct Debits.

- (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 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 Initiator's Bank, PROVIDED such a request is made not 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 disputes 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:
- the 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 Initiator's 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 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.