

Natural Choice Products Ltd Ph: 09 441 4238

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Direct Debit Authority

My accour	t to be debited (acce		Initiator's authorisation code			
				0 2 3 1	2 7 3	
Name of m	ıy bank:					
				Approved		
0 0	0 0 0 0		Suffix	3127	03/19	
Bank	Branch	Account	Sullix			
	cceptor to my ban	k: ount with the amounts of direc	t dobit instruction	es received from		
-	•					
		ited (the 'Initiator') with the au y until further notice from me.	thorisation code	specified on this au	ithority and	
I agree that	this authority is sub	ject to:				

- my bank's terms and conditions that relate to my account, and
- the terms and conditions listed below.

Authorised signature/s:	Date:		
		1 1	

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.
- 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.

For Bank Use Only				
	Date Received:	Recorded by:	Checked by:	BANK STAMP
Original - Retain at I Copy - Forward to Ir	Branch nitiator if requested	· 		