

Direct Debit Request

Request and Authority to debit the account named below to pay Estate Agents Co-operative Limited

Request and Authority to debit

Your Surname or company name _____

Your Given names or ABN/ARBN _____ "you"

request and authorise Estate Agents Co-operative Limited Debit User ID:440915 to arrange, through its own financial institution, a debit to your nominated account any amount Estate Agents Co-operative Limited, has deemed payable by *you*.

This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from *your* account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

Insert the name and address of financial institution at which account is held

Financial institution name

Address

Insert details of account to be debited

Name/s on account

BSB number (Must be 6 Digits) | | | | - | | | | |

Account number | | | | | | | | | | | | |

Acknowledgment

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Estate Agents Co-operative Limited as set out in this Request and in your Direct Debit Request Service Agreement.

Insert your signature and address

Signature (If signing for a company, sign and print full name and capacity for signing eg. director)

Address

Date / /

Second account signatory (if required)

Signature (If signing for a company, sign and print full name and capacity for signing eg. director)

Address

Date / /