

# Credit Card - Direct Debit Request (DDR)

Direct Debit Request - This form provides Bank of Sydney with the authority to automatically withdraw the amount specified in Section 3 from the nominated account to pay the Bank of Sydney credit card account specified in Section 1.

Our Privacy policy is available on our website at banksyd.com.au or by calling us on 1300 BANKING (1300 2265 464). The privacy policy covers

Section 1 - Customer and Cre					
Customer Name (in full)	ait Gara Details				
customer rame (in ran)					
Home Phone	Work Phone		Mobile Phone		
Bank of Sydney Credit Card Accoun	t to be paid				
Section 2 - Nominated Accoun	nt to be debited				
Your credit card account will be paid		inated account:			
Account Name	from the following from		or Financial Institution		
		Nume of Burk	or i maneiar matication		
BSB Number Account Num	Description to a	Description to appear on the account that payment is coming from			
(Ma)			aximum 18 characters )		
Castian 2. The Barres of Cab					
Section 3 - The Payment Sche	eaule				
Each Month I want to schedule the follo	wing: (Please tick)				
Minimum Payment	The amount shown on your monthly credit card statement as the "minimum monthly repayment".				
Full Payment	The full amount shown on your monthly credit card statement as the "closing balance" will be paid.				
Fixed payment of	\$	(min \$10 ) OR	%	(min 3%) of my "closing balance".	
	A fixed dollar or percentage of your monthly credit card statement "closing balance" will be paid.*				
* If the "closing balance" is less than you	r nominated amount, only	the "closing halance" will b	he naid. If your nominated am	ount falls below the "minimum	
monthly payment", Bank of Sydney will	•	-	oc paid. If your nonlinated and	ouncians below the minimum	
Section 4 - Signature Authoris	sation				
I/We authorise and request you until fur		ebit my/our account as de	escribed above, amounts whic	h Bank of Sydney may debit or	
charge me/us.	-				
I/we acknowledge that this Direct Debit in force in accordance with the terms ar			: Debit Request Service Agreer	nent (see page 2) and is to remain	
Customer Name (in full)  Customer Name (if account to be debited is a joint account)					
Costonici Name (ii account to be desired is a joint acco				ted is a joint account/	
Customar Signatura	Date		<b>C</b> : .	D-t-	
Customer Signature	Date	Custom	ner Signature	Date	
				1 1	
Please ensure this form is signed in a	accordance with the signir	ng authority for the acco	unt to be debited.		
Section 4 - Bank Use Only					
Customer(s) signature (s) verified and	form has been signed in a	ccordance with the Mode	of Operation (max of 2 accour	nt holders)	
Account details verified against ICBS	_	e Allows Direct Debit Faci			
		c ,	my to be established		
Direct Debit request entered in BOSN	et	Ва	nk Officer (s) Signature	Date	
Request accepted and actioned by:				1 1	
Request approved by					
nequest approved by				1 1	

# **Direct Debit Request Service Agreement**

Please retain this page for your records

# Section 1 - Debiting your account

- 1.1 This direct debit arrangement will continue to apply to any new Bank of Sydney credit card account which you may be given as a result of your card being reported lost or stolen or Bank of Sydney processing your request to transfer to a new Bank of Sydney credit card account.
- 1.2 The direct debit will be processed on the 10th of every month, or the prior business day if the 10th falls on a public holiday or weekend.
- 1.3 If we receive instructions to setup a direct debit on the 10th of the month (or the prior business day), it will **not** commence until the 10th of the following month. You should continue to make manual payments until the direct debit commences.
- 1.4 By signing a Direct Debit Request, you have authorised us to arrange for funds to be debited from your nominated account according to the agreement we have with you.
- 1.5 We will keep your direct debit records and account details private and will use it for the purposes of conducting direct debits or unless this information is required by us to investigate a claim made on us relating to an alleged incorrect or wrongful debit, or as otherwise required by law. For further information on our privacy and information handling practices, including other circumstances where we may be permitted to disclose information, please refer to the Bank's Privacy Policy, which is available at www.banksyd.com.au or upon request from any branch of the Bank.
- 1.6 Please ensure that you have sufficient funds in your nominated account when payments are due to be drawn. If you do not have sufficient funds, the transaction will be rejected, a dishonour fee may be charged to your account, and interest will also be applicable to the outstanding balance on your credit card account. We treat the payment as if it was never made.
- 1.7 Direct debiting is not available on a full range of accounts. If in doubt, please refer to your bank or financial institution where you maintain your account before signing this document. You should check the account details provided above against a recent account statement.

#### **Section 2 - Enquiries**

2.1 If you believe there has been an error in debiting your account, you should call us on **1300 BANKING (1300 2265 464)** and confirm the details in writing with us as soon as possible so we can resolve your query quickly. Send written correspondence to:

Bank of Sydney Cards Department GPO Box 4288

SYDNEY NSW 2001

- 2.2 If our investigations show that your account has been incorrectly debited, we will adjust your account accordingly. We will also notify you in writing of the amount by which your account has been adjusted.
- 2.3 If our investigations show that your account has not been incorrectly debited, we will respond to your query by providing you with reasons and copies of any evidence for this finding.
- 2.4 Any queries you may have about an error made in debiting your account should be directed to us so that we can attempt to resolve the matter.

## Section 3 - Changes by us

We may vary any details in this agreement or a Direct Debit Request at any time by giving you at least 14 days written notice. We may cancel this Direct Debit Request for any other reason. In this event we will notify you in writing at your last known address on bank records.

### **Section 4 - Changes by you**

You may cancel, request deferment of, or alteration to, your authority for us to debit your account at any time by giving us 10 business days notice in writing before the next debit payment is to be made. This notice should be given to us in the first instance.

Send written correspondence to our address listed above in point 2.1 or come into any Branch of Bank of Sydney.

#### **Section 5 - Your responsibility**

It is your responsibility to:

- a) ensure that your account details are correct. You should complete your account details (including your Bank State Branch (BSB) number) directly off a recent account statement.
- b) ensure there are sufficient cleared funds available in your nominated account to allow a debit payment to be made; and
- c) ensure that suitable alternate arrangements are made (where required) if the direct debit is cancelled by either party or for any other reason
- d) let us know if the nominated account is closed (or if the nominated account changes)