Direct Debit Request

peoplehub

BODY AND BUSINESS BALANCE
WWW.BODYANDBUSINESSBALANCE.COM.AU

BUSINESS	Romeo Caporaso	ABN	22576168492	PH	(08) 8337 4460	EMAIL	info@TaxAccountingAdelaide.com

SURNAME		GIVEN NAME	
MOBILE		EMAIL	
ADDRESS			

Street address | Suburb | State | Postcode

Payment Details | A payment as per form details

First Debit Date		☐ Until further notice	**Frequency of Payments:**
First Debit	$	☐ For a minimum of (#)	payments ☐ Weekly ☐ Fortnightly
Regular Debit	$	☒ Until a maximum of $	is collected ☐ Monthly ☒ Once only

Fees / Charges

Direct Debit Fee: $0.99 **Credit Card Fee:** $0.99 + 1.9% (Visa & MCard) **or** $0.99 + 4.4% (Amex & Diners) **SMS Fee**: $0.33

Debit from Bank or Cheque Account, Building Society or Credit Union

Financial Institution _____ Branch _____

BSB Number ___ — ___ Account Number _____

Account Name _____

NOTE – Direct Debit is not available on the full range of accounts – if in doubt please refer to your financial institution

PeopleHub from Credit Card

☐ **VISA** ☐ **MasterCard** ☐ **AMEX** ☐ **Diners**

Card Number _____

Expiry Date ___ / ___ Card Holder Name: _____

*By signing this form I/we authorise PeopleHub Pty Ltd acting on behalf of the Business to debit payments from my specified credit card above, and I/we acknowledge that **PEOPLEHUB TOOWONG** will appear as the business name on my credit card statement. Furthermore, I/we agree to reimburse PeopleHub Pty Ltd for any successful claims made by the Card Holder through their financial institution against PeopleHub Pty Ltd.*

Terms and Conditions

I/We hereby authorise PeopleHub Pty Ltd to make periodic withdrawals from the financial institution specified above on behalf of the business as described above. (Hereafter referred to as "the business") The administration of this agreement is conducted by PeopleHub Pty Ltd acting as the billing agent for the Business. The services provided by PeopleHub Pty Ltd are administrative to the status of the Agreement and do not extend to the provision of any services or benefits of the Agreement as provided by the Business. This authority shall be interpreted and enforced pursuant to the laws of the state of Queensland. I/We request until further notice in writing to direct debit my/our account described above, any amounts which PeopleHub Pty Ltd, **User ID 372248**, may debit or charge me / us through the PeopleHub system.

1. The Financial Institution may, in its absolute discretion, determine the order of priority of payments by it if any monies pursuant to this request or any other authority or mandate.
2. The Financial Institution may, in its absolute discretion, at any time by notice in writing to me / us terminate this request as to future debits.
3. The user may, by prior arrangement and advice to me / we vary the amount or frequency of future debits.
4. You are advised to verify account details against a recent bank statement and if uncertain you should contact your financial institution.
5. It is your responsibility to ensure that you have sufficient clear funds in your nominated account to enable the direct debit to be honoured by your financial institution. Direct debits normally occur overnight; however transactions can take up to three (3) days depending on your financial institution.
6. Any dispute arising from this or subsequent direct debits will be in the first instance directed to the business or PeopleHub Pty Ltd. If no resolution is forthcoming you are advised to contact your financial institution.
7. We will keep your information about your nominated account at the financial institution private and confidential unless this information is required to investigate a claim made in it relating to an alleged incorrect or wrongful debt, or otherwise required by law.
8. By signing this form I/We agree to give 14 working days notice of cancellation in writing to the business.
9. I/We authorise the Debit User to verify the details of the abovementioned account with my/our Financial Institution.
10. I/We authorise the Financial Institution to release information allowing the Debit User to verify the above mentioned account details.

This authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit Request and I/we understand the same

Signature(s) of the nominated Account Holder / Credit Card Holder _____ Date ___ / ___ / ___