IFS NZ Pty Ltd

Ph: 0800 876 222

PO Box 36614

 Northcote, Auckland

New Zealand

accounts@smartfreight.com

Email:

**Name of account to be debited:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**AUTHORITY TO ACCEPT**

**DIRECT DEBITS**

*(Not to operate as an assignment*

*or an agreement)*



|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Account details:**  |  |  | **AUTHORISATION CODE**  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  *0335091*  |  |
|   *Bank Branch number Account number Suffix*  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  *To: The Manager*

|  |
| --- |
| *Bank:*  |
| *Branch:*  |

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|  |
| --- |
| *Date:*  |

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|  |
| --- |
|  *I/We authorise you until further notice in writing to debit my/our account with you with all amounts which*  |
| *IFS NZ PTY LTD**The registered initiator of the above Authorisation Code may initiate by Direct Debit. (hereinafter referred to as the Initiator) I/We acknowledge and accept that the Bank accepts this Authority only upon the conditions listed on this form.*  |

|  |  |
| --- | --- |
| **Information to appear in my/our bank statement:** |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  *Payer Particulars Payer*  |  *Code Payer Reference* |
|  |  |

|  |
| --- |
| *\* Please provide email address for us to send advance notice regarding the amount and due date of the Direct Debit: (refer to paragraph 1(a) below)* |
|  **Contact name:**  |
|  **Email address:** |

|  |  |
| --- | --- |
| **Authorised Signature:** | **Authorised Signature:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  | **APPROVED**  | *For Bank Use Only:*  | *Date* *Received:*  | *Recorded By:*  | *Checked By:*  |  |  |  |
|  | *3509**06* |  *17*  |  |  |  |  |  | *BANK* *STAMP*  |  |
| *Original – Retain at Branch* *Copy – Forward to Initiator if requested*  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Conditions of this Authority to Accept Direct Debits****1) The Initiator:** * 1. Has agreed to give advance notice (ie, tax invoice(s) or account statement) of the net amount of each Direct Debit and the due date of the debiting at least 10 calendar days (but not more than 2 calendar months) before the date when the Direct Debit will be initiated, normally on the **15th of every month**. This notice will be provided in writing (including by electronic means and SMS where the Customer has provided prior written consent to communicate electronically). **Please note unless advice to the contrary is received from you at least two (2) days prior to the initiating date, the amount stated on the advice notice will be Direct Debited from your Bank Account on the initiating date.**
	2. 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.
	3. May, upon receiving written notice (dated after the date of this Authority) from a bank to which I/we have transferred my/our account, initiate Direct Debits in reliance of that written notice and this Authority from the account identified in the written notice.

 **2) The Customer may:** 1. At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator.
2. 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.

  | **3) The Customer acknowledges that:** * 1. 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.
	2. 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.
	3. 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 dispute lies between me/us and the Initiator.
	4. 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; and
		+ Any variations between notices given by the Initiator and the amounts of Direct Debits.
	5. The Bank is not responsible for, or under any liability in respect of the Initiator’s failure to give notice in accordance with 1(a) nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.

  **4) The Bank may:** 1. In its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this or any other authority, cheque or draft properly signed by me/us and given to or drawn on the Bank.
2. At any time terminate this Authority as to future payments by notice in writing to me/us.
3. Charge its current fees for this service in force from time-to-time.
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