



# Direct Debit Request

Document No.

200702

Customer No.

## Customer Details

Surname/Co. Name:	<input type="text"/>	First Name:	<input type="text"/>
Address:	<input type="text"/>		
Telephone:	<input type="text"/>	Email:	<input type="text"/>

## Amount and Frequency of Direct Debit

Direct Debit Amount:	<input type="text"/>
Frequency:	<input type="text"/>
First Direct Debit Date:	<input type="text"/>
No of Direct Debits:	<input type="text"/>

## Direct Debit From Bank Account

Account Name:	<input type="text"/>		
BSB:	<input type="text"/>	Account Number:	<input type="text"/>

I/We request and authorise eDebit Pty Ltd (ABN 74 112 883 744) (User ID Number 436990) to debit from my/our above bank account the above direct debit amount at the above frequency for the minimum number of direct debit amounts and thereafter until cancelled in writing by me to the Principal\* pursuant to my agreement with the Principal and subject to the terms and conditions of the attached Direct Debit Request Service Agreement.

I/We have read the terms and conditions of the attached Direct Debit Service Agreement and agree to those terms and conditions.

Signature of Account Holder

Date / /

Signature of Joint Account Holder

Date / /

\*Delete as required

Tru Blu Collection Services Pty Ltd - Office Use ONLY

Staff Name:

Acc Verified:

Photo ID: