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DIRECT DEBIT REQUEST FORM - PAYMENT OPTION ONE

Authority	Name of Customer(s) giving the DDR				
			Name of Debit User	APCA User ID Number	
	Authorise you		City of Albany	207573	
	to arrange for funds to be debited from my/our account at the financial institution identified below as prescribed below through the Bulk Electronic Clearing System (BECS).				
ayment Details The payment is for		ır	CITY OF ALBANY COUNCIL RATES PAYMENT		
	Assessment Number				
	Property Address				
etails of the	Name of the F	inancial Institu	ition		
lebited					
	Full Account N	lame (Your na	me/s as it appears on Bank Stat	ement)	
All details must be supplied)					
	BSB	Number	Account r	number	
		-			
condition			nt in accordance with our Agreel Full amount as per Rate N		
Maximu	ns:	ebited		otice	
Maximu	ns: m Amount to be do	ebited Circle)	Full amount as per Rate N	ner notice / This year only	
Maximul Frequen This authoris Service Agree	m Amount to be do cy of debit (Please Payment will sation is to remain ement (which has	circle) be processed in force in action been read and overify the de	Full amount as per Rate N Annual Payment until furth d on the due date outlined on y coordance with the terms described understood by me).	otice ner notice / This year only your original rates notice ribed in the Direct Debit Request our Financial Institution and authorise	
Maximul Frequen This authoris Service Agree	m Amount to be do cy of debit (Please Payment will sation is to remain ement (which has	circle) be processed in force in action been read and overify the de	Full amount as per Rate N Annual Payment until furth d on the due date outlined on y coordance with the terms described understood by me).	otice ner notice / This year only your original rates notice ribed in the Direct Debit Request	
Maximul Frequen This authoris Service Agree	m Amount to be do	circle) be processed in force in action been read and overify the de	Full amount as per Rate N Annual Payment until furth d on the due date outlined on y coordance with the terms described understood by me). etails of the account with my/omation allowing the City of Alb	otice ner notice / This year only your original rates notice ribed in the Direct Debit Request our Financial Institution and authorise	
Maximum Frequen This authoris Service Agree I/We authoris my/our Finan	m Amount to be done of debit (Please Payment will sation is to remain ement (which has see the Debit User to cial Institution to	circle) be processed in force in action been read and overify the de	Full amount as per Rate N Annual Payment until furth d on the due date outlined on y coordance with the terms described understood by me). etails of the account with my/onation allowing the City of Alb	ribed in the Direct Debit Request our Financial Institution and authorise any to verify the account details.	

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City of Albany 102 North Road ALBANY WA 6330 PO Box 484 ALBANY WA 6331

Ph: (08) 6820 3000

Direct Debit Request Service Agreement

This is your Direct Debit Service Agreement with City of Albany, APCA User ID 207573, ABN 94 717 875 167. It explains what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider.

Please keep this agreement for future reference. It forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your DDR authorisation.

Definitions	account means the account held at <i>your financial institution</i> from which <i>we</i> are authorised to arrange for funds to be debited.				
	agreement means this Direct Debit Request Service Agreement between you and us.				
	banking day means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.				
	debit day means the day that payment by you to us is due. debit payment means a particular transaction where a debit is made. direct debit request means the Direct Debit Request between us and you. us or we means, City of Albany, (the Debit User) you have authorised by requesting a Direct Debit Request. you means the customer who has signed or authorised by other means the Direct Debit Request.				
	your financial institution means the financial institution nominated by you on the DDR at which the account is maintained.				
Debiting your account	1.1 By signing a <i>Direct Debit Request</i> or by providing <i>us</i> with a valid instruction, <i>you</i> have authorised <i>us</i> to arrange for funds to be debited from <i>your account. You</i> should refer to the <i>Direct Debit Request</i> and this agreement for the terms of the arrangement between <i>us</i> and <i>you</i> .				
	1.2 We will only arrange for funds to be debited from your account as authorised in the Direct Debit Request.				
	or				
	We will only arrange for funds to be debited from <i>your account</i> if we have sent to the address nominated by <i>you</i> in the <i>Direct Debit Request</i> , a billing advice which specifies the amount payable by <i>you</i> to <i>us</i> and when it is due.				
	1.3 If the <i>debit day</i> falls on a day that is not a <i>banking day</i> , we may direct <i>your financial institution</i> to debit <i>your account</i> on the following <i>banking day</i> . If <i>you</i> are unsure about which day <i>your account</i> has or will be debited you should ask <i>your financial institution</i> .				
2. Amendments by us	2.1 We may vary any details of this agreement or a Direct Debit Request at any time by giving you at least fourteen (14) days written notice.				
3. Amendments by you	3.1 You may change a debit payment, or terminate (cancel) this agreement at any time by providing us with at least fourteen (14) days notification by writing to:				
	City of Albany, PO Box 484, ALBANY WA 6331 or via email rates@albany.wa.gov.au				
	3.2 You may defer a debit payment,at any time by writing to:				
	City of Albany, PO Box 484, ALBANY WA 6331 or via email <u>rates@albany.wa.gov.au</u>				
	or				
	by telephoning us on (08) 6820 3100 during business hours;				

4. Your obligations	4.1 It is <i>your</i> responsibility to ensure that there are sufficient clear funds available in <i>your</i> account to allow a <i>debit payment</i> to be made in accordance with the <i>Direct Debit Request</i> .
	4.2 If there are insufficient clear funds in <i>your account</i> to meet a <i>debit payment</i> .
	a) you may be charged a fee and/or interest by your financial institution;
	 b) you may also incur fees or charges imposed or incurred by us, as shown in the current Schedule of Fees and Charges; and
	c) you must arrange for the debit payment to be made by another method or arrange for sufficient clear funds to be in your account by an agreed time so that we can process the debit payment.
	4.3 You should check your account statement to verify that the amounts debited from your account are correct.
	4.4 Interest will accrue under a Direct Debit payment plan on any balance outstanding past the original due date as specified on your rates notice (eligible pensioners and seniors are exempt from any interest charges.)
5. Disputes	5.1 If you believe there has been an error in debiting <i>your account</i> , <i>you</i> should notify us directly on (08) 6820 3100 and confirm that notice in writing with us as soon as possible so that we can resolve your query. Alternatively you can take it up directly with your financial institution.
	5.2 If we conclude as a result of our investigations that <i>your</i> account has been incorrectly debited we will respond to <i>your</i> query by arranging for <i>your financial institution</i> to adjust <i>your</i> account (including interest and charges) accordingly. We will also notify you in writing of the amount by which <i>your account</i> has been adjusted.
	5.3 If we conclude as a result of our investigations that <i>your account</i> has not been incorrectly debited we will respond to <i>your</i> query by providing <i>you</i> with reasons and any evidence for this finding in writing.
6. Accounts	You should check:
	 a) with your financial institution whether direct debiting is available from your account as direct debiting is not available through BECS on all accounts offered by financial institutions.
	 b) your account details which you have provided to us are correct by checking them against a recent account statement; and
	c) with your financial institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.
7. Confidentiality	7.1 We will keep any information (including <i>your account</i> details) in <i>your Direct Debit Request</i> confidential. We will make reasonable efforts to keep any such information that we have about <i>you</i> secure and to ensure that any of <i>our</i> employees or agents who have access to information about <i>you</i> do not make any unauthorised use, modification, reproduction or disclosure of that information.
	7.2 We will only disclose information that we have about you:
	a) to the extent specifically required by law; or
	 b) for the purposes of this agreement (including disclosing information in connection with any query or claim).
8. Notice	8.1 If <i>you</i> wish to notify <i>us</i> in writing about anything relating to this <i>agreement</i> , you should write to:
	City of Albany, PO Box 484, ALBANY WA 6331 or via email rates@albany.wa.gov.au
	8.2 We may send notices either electronically to your email address or by ordinary post to the address <i>you</i> have given us.
	8.3 Any notice will be deemed to have been received on the third <i>banking day</i> after emailing or posting.
9. Standard	9.1 We will cancel the direct debit should there be:
	Three consecutive rejections (dishonours) by your bank
	Or Repeated rejections (dishonours) resulting in insufficient payments remaining to clear the balance in full by 30 June of the current financial year (unless otherwise agreed)
	Cancellation of this arrangement will result in the outstanding balance being due for immediate payment.