

107 Great South Road, Papakura 2110 PO Box 72243, Papakura 2244 Ph: 09 295 0515 Fax: 09 296 2632 nz-customerservice-water@veolia.com Tax Invoice GST Reg No: 67 868 439

AUTOMATIC PAYMENT FORM																							
DO NOT RETURN THIS FORM TO VEOLIA This can be set up via internet banking or taken to your bank for loading.																							
TO THE MANAGER OF																							
Name of Bank	:								IMPORTANT PLEASE TICK														
Branch						\neg	This is a new authority																
Town/City						As from (first payment date), this authority replaces existing authorities for \$ in favour of the same payee																	
BANK ACCOUNT DETAILS (from which your payments are to be made from)																							
				_					_										-				\neg
Bank Account No		BANK			BRANC						ACCOUNT NUMBER SUFF						FIX	ı x					
Bank Account Name (ie J Brown & S Smith)																							
			DE	TAIL	LS TO	APPE	AR C)N	мү/с	UR B	AN	K ST	ATEN	MEN	Т								
PARTICULARS (Please us your Water Acct No)				(Prop	CODE REFERENCE (Initials & Surname)																		
FREQUENCY & AMOUNT OF PAYMENTS																							
First Payment Date: Last Payment Date: / / 20				ate:	OR Until Furthe																		
Tick Box (ONE ONLY)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1																						
Fixed Payment Amount To Pay Amount \$ A					Amo	mount in Words																	
PAYEE BANK ACCOUNT DETAILS (account which your payments are to be made to)																							
		0	3	-	0	3	9	9	-	0		2	5	5	4	2	2 6	3	-	0	0		2
Bank Accoun	BANK		BRANCH						ACCOUNT NUMB				BER	ER				SUFFIX					
Bank Accoun	Bank Account Name VEOLIA WATER SERVICES (ANZ) PTY LTD																						
Authorisation Acknowledgement																							
Name(s) on Account:																							
Customers Signature Contact Ph: Date:																							
Customers Signature					c	Contact Ph:								Date:									



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CONDITIONS OF THIS AUTHORITY

- 1. The Bank will use reasonable care and skill to give effect to the directions given to it in this authority.
- Where the directions given in the authority have been given by me/us for the purpose of a
 business, the Bank accepts those directions without any responsibility or liability for any refusal or
 omission to make all or any of the payments or for late payment or for any omission to follow such
 directions.
- 3. The Bank accepts no responsibility or liability for the accuracy of the information contained in the payment information fields on this authority.
- 4. I/We undertake to advise the Bank immediately of any information about payments shown on bank statements which is incorrect.
- This authority is subject to any arrangement now or hereafter subsisting between myself/ourselves and the Bank in relation to my/our account.
- 6. The Bank in its absolute discretion conclusively determines the order or priority of payment by it of any monies pursuant to this or any other authority or cheque which I/we may now or hereafter give to the Bank or draw on my/our account.
- 7. The Bank may in its absolute discretion refuse to make any one or more payments pursuant to this authority where there are insufficient funds available in my/our account.
- 8. This authority may be terminated or reduced by the Bank or the payee without notice to me/us in respect of the payments detailed over.
- 9. This authority will remain in force and effect in respect of all payments made in good faith notwithstanding my/our death or bankruptcy or any other revocation is received by the Bank.
- 10. All current Bank and Government charges for this service in force from time to time are to be debited to my/our account.

ALTERATION TO DECLIE AD AMOUNT

	ALIERATION TO REGULAR AMOUNT										
Please alter the regular amount of this automatic payment.											
As from / / 20	New Regular Payment Amount \$	Amount in Words	Customer's Signature								
FOR BANK USE ONLY											
Date Received:	Received By:	Checked By:	BANK STAMP								

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