

| DIRECT DEBIT REC                           | (OLST (DDIK)   |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|--|--|------------------------------------|-------|------|--|-----|------|--|----------------------------|---------|---|--|---|------|-----|
| Customers'                                 |  | Name of Customer(s) giving the DDR |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| Authority                                  | I/We   |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  |  | Name of Debit User                 |       |      |  |     |      |  | APCA User ID Number 401812 |         |   |  |   |      |     |
|  | Authorise and request  | CENTRAL TABLELANDS WATER           |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | to arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS)  This authorisation is to remain in force in accordance with the terms described in the Direct Debit Request until altered in writing. |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| Details of the                             | Name & Address of the Financial Institution  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| Account to be                              |  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| Debited                                    | Account Name   |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| (All details must                          |  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| be supplied)                               | BSB Number Account Number  |                                    |       |      |  |     |      |  |                            | ı       |   |  |   |      |     |
|  |  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| Payment Details                            | The payment is for (Property Address)  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | Water Account Number   |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | Identified by  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
| Please tick the appropriate box (Optional) | I/We request that you debit my/our account in accordance with our Agreement.   |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | OR OR  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | I/We request that you debit my/our account in accordance with our Agreement and subject to one or more of the following conditions:  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | Minimum amount to be debited \$  |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | Frequency of debit   | :                                  | Quart | erly |  | Wee | ekly |  | Fort                       | nightly | ′ |  |   | Mont | hly |
|  | First payment date   |                                    |       | /    |  |     | /    |  |                            |         |   |  |   |      |     |
|  | <ol> <li>I/We authorise the following:</li> <li>The Debit User to verify the details of the abovementioned account with my/our Financial Institution</li> <li>The Financial Institution to release information allowing the Debit User to verify the abovementioned account details</li> <li>Signature</li> </ol>      |                                    |       |      |  |     |      |  |                            |         |   |  |   |      |     |
|  | J.B. Ideal C   |                                    |       |      |  |     |      |  |                            |         |   |  | , | ,    |     |



|                  | Signature                | Date             |                      |      |  |  |
|------------------|--------------------------|------------------|----------------------|------|--|--|
|                  |                          |                  |                      | / /  |  |  |
|                  |                          |                  | Contact Phone Number |      |  |  |
|                  |                          |                  |                      |      |  |  |
| Office Use Only: | Computer input completed | DDR Registered □ |                      | Date |  |  |
|                  | Name of Officer:         | Signature:       |                      | / /  |  |  |

The information you provide is personal information for the purposes of the Privacy and Personal Information Protection Act 1998. The supply of the information by you is voluntary. If you cannot provide or do not wish to provide the information sought, your application may be unable to be processed. This personal information is collected from you in order to process your application.

## **Direct Debit Request Service Agreement (DDRSA)**

- 1 By signing the Direct Debit Request, you authorise us to arrange for funds to be debited from your Account in accordance with the Agreement.
- We will advise you 14 days in advance of any changes to the Direct Debit Request.
- 3 For all matters relating to the Direct Debit Request, including cancellation, alteration or suspension of drawing arrangements or to stop or defer a payment, or to investigate or dispute a previous payment, you should contact the following:

Central Tablelands Water 30 Church Street BLAYNEY NSW 2799 Ph: 02 6391 7200

## And

(a) Allow for 14 days for the amendments to take effect or to respond to a dispute.

If our investigations show that your Account has been incorrectly debited, we will arrange for the Financial Institution to adjust your Account accordingly. We will also notify you in writing of the amount by which your Account has been adjusted. If our investigations show that your Account has been correctly debited, we will respond to your query by providing you with reasons and copies of any evidence for this finding.

If we cannot resolve the matter, you can still refer it to your Financial Institution, which will obtain details from you of the disputed payment and may lodge a claim on your behalf.

- **4** You should be aware that:
  - (a) direct debiting through the Bulk Electronic Clearing System (BECS) is not available on all accounts; and
  - (b) You should check your Account details (including the Bank State Branch (BSB) number) directly against a recent statement from your Financial Institution.

If you are in any doubt, please check with your Financial Institution before completing the drawing authority.

- **5** It is your responsibility to ensure that:
  - (a) sufficient cleared funds are in the Account when the payments are to be drawn;
  - the authorisation to debit the Account is in the same name as the Account signing instruction held by the Financial Institution where the Account is held;
  - (b) suitable arrangements are made if the direct debit is cancelled:
    - by yourself;
    - by your Financial Institution; or
    - For any other reason.
- If the due date for payment falls on a day other than a Banking Business Day, the payment will be processed on the next Banking Business Day. If you are uncertain when the payment will be debited from your Account, please check with your Financial Institution.

- **7** For returned unpaid transactions, the following procedures or policies will apply:
  - (a) we treat the payment as if it was never made;
  - (b) services may be suspended until the outstanding charges are paid; and/or
  - (c) A fee may be applied for drawings that are returned unpaid. We reserve the right to cancel the Direct Debit Request at any time if drawings are returned unpaid by your Financial Institution.
- All Customer records and Account details will be kept private and confidential to be disclosed only at your request or at the request of the Financial Institution in connection with a claim made to correct/investigate an alleged incorrect or wrongful debit or otherwise as required by law.

## **Definitions**

Unless otherwise defined, a term defined in the Agreement has the same meaning when used in this DDRSA and:

**Account** means the account nominated in the Direct Debit Request, held at your Financial Institution from which we are authorised to arrange for funds to be debited;

**Agreement** means the Terms and Conditions (including BPAY), including the Schedules to those Terms and Conditions, as amended from time to time;

**Direct Debit Request** means the Direct Debit Request between us and you as amended from time to time;

**Financial Institution** is the financial institution where you hold the account nominated in your Direct Debit Request as the account from which we are authorised to arrange for funds to be debited;

**I/We** mean the Customer/s who signed the Direct Debit Request.

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