



VAT Registration 4910180233

ADDRESS : 6 PARTRIDGE PLACE
YELLOWWOOD PARK
DURBAN
4011

TELEPHONE : 031 4691827
CELLULAR : 082 4589733

DEBIT ORDER INSTRUCTION

FROM: (NAME OF DEBTOR) _____

(ADDRESS) _____

DATE : _____

Dear Sirs

AGREEMENT "PROPOSAL, ETC" DATED _____

The details of my/our bank account are as follows:

BANK _____

BRANCH NAME AND TOWN _____

BRANCH NUMBER _____

ACCOUNT NUMBER _____

TYPE OF ACCOUNT: (tick appropriate box)

CURRENT (CHEQUE) [] SAVINGS [] TRANSMISSION []

I/We hereby instruct and authorise you to draw against my/our account with the abovementioned bank (or any other bank or branch to which I/we may transfer my/our account) the sum of R_____ (amount in words), the amount necessary for payment of monthly installment due in respect of the abovementioned agreement on 1st day (or first business day) of each and every month commencing on _____ and continuing until termination of our agreement or until cancelled by me/us in writing.

(delete whichever is inapplicable)

** Please include / do not include any additional monthly charges such as ADSL bandwidth top up fees, etc

Initial here _____

All such withdrawals from my/our bank account by you shall be treated as though they had been signed by me/us personally. I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement or on an accompanying voucher.

I/We agree to pay any bank charges relating to this debit order instruction.

This authority may be cancelled by me/us by giving your thirty days' notice in writing, sent by prepaid registered post, but I/we understand that I/we shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

Receipt of this instruction by you shall be regarded as receipt thereof by my/our bank (whichever it is or will be).

ASSIGNMENT:

I/ We acknowledge that the party hereby authorised to effect the drawing(s) against my/out account may not cede or assign any of its rights to any third party without my/our prior written consent and that I/we may not delegate any of my/our obligations in terms of this contract/authority to any third party without prior written consent of the authorised party.

NOTE: A cancelled cheque should be attached for bank identification purposes (Current Accounts Only).

Signed at..... on this day of.....

SIGNATURE AS USED FOR SIGNING CHEQUES (Where legally necessary)

ASSISTED BY CAPACITY

Agreement Reference Number

This Agreement reference number is: _____