

Direct Debit Request (DDR)

Customer's Authority

Name of Customer/s giving the DDR _____
Union Member Number _____

I/We _____

authorise and request you

Name of Debit User _____ APCA User ID Number _____
CEPU Plumbing Division, Vic Branch **208 687**

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 or to debit my/our account by other means.

This authorisation is to remain in force in accordance with the terms described in the Direct Debit Agreement.

Customer's Address

Residential Address _____
Postcode _____
Phone _____ Mobile _____
Email _____

Details of the Account to be Debited

Name and address of the financial institution at which your account is held _____
Postcode _____

Please note: Credit Card details **can not** be used for Direct Debit payments

Account name (please insert your name in full) _____

BSB number _____ Account number _____

ABN/ARBN (if applicable) _____ Branch Name _____

Declaration (if in joint name/s both signatures may be required)

I/We also authorise the following:

1. The Debit User to verify the details of the abovementioned account with my/our financial institution
2. The financial institution to release information allowing the Debit User to verify the abovementioned account details

Signature _____ Date _____
Signature _____ Date _____

Please note: Direct Debiting is not available on the full range of accounts.
If in doubt, please refer to your financial institution.