



Exodec 229 cc
 PO Box 934
 Meyerton
 1960

Co. Reg No.: 2016/486897/07 converted from 2011/008688/23
 Cell: 071 600 1927

Fax: 086 608 7594

VAT:4630259770
 info@exodecgroup.co.za

BANK DEBIT ORDER INSTRUCTION

Name (Debtor) : _____ ID Number : _____
 Address : _____ Policy No. : _____
 _____ Debit Amount : _____
 _____ Commencement Date :

1	10	15	20	25	31
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 Cell No: _____ Abbreviated name as registered with the bank : EXODEC
 Email: _____

Dear Sirs/Madams

The details of my/our account are as follows:

BANK : _____ BRANCH TOWN : _____
 ACCOUNT NAME: _____ BRANCH NO : _____
 ACCOUNT NO. : _____ TYPE OF ACCOUNT : _____
 (savings, current, transmission)
 Commencement Date: _____

NOTE: DEBIT ORDER PAYMENTS BEFORE THE 10TH OF A MONTH IS FOR THE CURRENT MONTH AND AFTER THE 10TH IS PAYMENT FOR THE FOLLOWING MONTH.

This signed Authority and Mandate refers to our contract as dated as on signature hereof ("the Agreement"). I hereby authorise you to issue and deliver payment instructions to the bank for collection against my abovementioned account at my above mentioned bank (or any other bank or branch to which I may transfer my account) on condition that the sum of such payment instructions will never exceed my obligations as agreed to in the Agreement, and commencing on the commencement date and continuing until this Authority and Mandate is terminated by me by giving you notice in writing of no less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows

On the

1	10	15	20	25	31
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 day ("payment day") of each and every month commencing on _____.

- In the event that the payment day falls on a Saturday, Sunday or recognized South African public holiday, the payment day will automatically be the very next ordinary business day.
- Further, if there are insufficient funds in the nominated account to meet the obligation, you are entitled to track my account and re-present the instruction for payment as soon as sufficient funds are available in my account;
- A double payment will be deducted in the following month if the current month's premium could not be debited.
- It is the client's responsibility to ensure that their contact details are updated with Exodec as and when it changes.
- I agree that a price increase of not more than 10% can be effected without me signing a new debit order form but I must be informed via sms/email/post.

I understand that the withdrawals hereby authorised will be processed through a computerized system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and if provided to you should enable you to identify the Agreement. A payment reference is added to this form before the issuing of any payment instruction. I 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.

MANDATE

I acknowledge that all payment instructions issued by you shall be treated by my above mentioned bank as if the instructions had been issued by me/us personally.

CANCELLATION

I agree that although this Authority and Mandate may be cancelled by me, such cancellation will not cancel the Agreement. I 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.

ASSIGNMENT

I acknowledge that this Authority may be ceded to or assigned to a third party if the agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.

Signed at _____ on this _____ day of _____ 20____

SIGNATURE AS USED FOR SIGNING CHEQUES OR CREDIT CARD VOUCHERS

Assisted by: _____

FOR OFFICE USE
AGREEMENT REFERENCE NUMBER

This Agreement reference number is: _____