DIRECT DEBIT DETAILS FORM

The details you provide here will be used to set up your direct debit payment plan.

You will receive an email and SMS with a link to review and sign the agreement for your new payment plan.

Please use an everyday transaction account. **DO NOT PROVIDE DETAILS FOR A SAVINGS ACCOUNT AS THESE ARE NOT ABLE TO BE DIRECT DEBITED.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | CUSTOMER DETAILS  | \* Indicates mandatory fields |  |  |  |  |
|  | \* Given Name: |  | \* Surname: |  |  |  |
|  |  Address: |  |  |
|  | \*Mobile No: |  | \*DOB: |  |  |  |
|  | \* Email: |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  | PAYMENT DETAILS  |  \* Indicates mandatory fields |
|  | \*Financial Institution: |  | Branch: |  |  |
|  | \*Account Name: |  |  |
|  | \*BSB Number: |  | \*Account Number: |  |  |
|  | \*Payment Frequency  (Circle One) | Weekly | Fortnightly | Monthly  | \*First Repayment Date: We recommend your next pay day  |  / / |  |

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