



## Direct Debit Request (DDR) Name of Customer/s giving the DDR

Customer's Authority	I/We	Name of Co	ustomer/s giv	ing the DL	JK									
Customer or	,,,,,	Name of Cu	Name of Customer/s or Third Party giving the DDR											
Third Party's	I/We	Traine or oc												
Authority	,,,,,			Name of Debit User								APCA User ID number		
	authorise and request				Caremobile P/L (Trading As Caremobile)								xxxxxx	
	until further notice in writing, to arrange for funds to be debited through the Bu Clearing System (BECS) from my/our account at the Financial Institution identifinstructed by me/us or any other amounts as instructed or authorised to be debaccordance with the terms and conditions of the Direct Debit Request Service A (DDRSA) and the caremobile Direct Debit Policy, as amended from time to time.										lebited e Agre	in		
Payment Details		uthority allows on the Custon									er the A	greem	ent	
Step 1 Choose the	e approp	oriate Payme	nt Method fro	om Options	s <b>A</b> or	<b>B</b> belo	W							
Option A Credit Card	Pleas Visa	e indicate yo	ur selection v Masterca											
Card Number	Expiry Date													
Card Holder Sign	ature					Date				_				
Option B	Name	n	Branch name											
Bank/Credit														
Union	Accour	nt name (plea	se insert voi	ır name in	full)									
Details of the Account to be debited	rtocour	Trialle (piec	ide indent yet		Tully									
All details must be						ABN	I/ARB	N (if	f					
supplied	BSB r	number	Account num	nber	ber applicable)									
	<b>Note:</b> Direct debiting is not available on the full range of accounts.  If in doubt, please refer to your bank/financial institution.													
Customer Authorisation If in join name/s both signatures may be required	By signing below, I/we acknowledge that this Direct Debit arrangement is governed by the terms of Authorisation the DDRSA attached to this request. I/We also authorise Caremobile P/L Trading As Caremobile to verify (if need be) the details of the account with my/our Financial Institution mentioned above.													
	Signatu	Sig	Signature											
	X					X								
	Date					Date								
	Caremobile Account Number					Caremobile Account Name:								

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

- By signing the Direct Debit Request, you authorise us to arrange for funds to be debited from your Account in accordance with the Agreement which we have with you, either of you, or a Third Party.
- 2 The amounts drawn will be as due under the Agreement
- We will advise you 14 days in advance of any changes to the Direct Debit Request.
- 4 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:
  - (a) Contact Caremobile Customer Service on 1300 725 999

## And

(b) 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, following our investigations, we believe on reasonable grounds 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.

- 5 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.

- 6 It is your responsibility to ensure that:
  - 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;
  - (c) suitable arrangements are made if the direct debit is cancelled:
    - by yourself;
    - by your Financial Institution; or
    - For any other reason.

- 7 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.
- **8** 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.
- 9 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.
- 10 If any provision of this DDRSA is found to be illegal, void or unenforceable for unfairness or any other reason (for example, if a court or other tribunal or authority declares it so), the remaining provisions of this DDRSA will continue to apply to the extent possible as if the void or unenforceable provision had never existed.

## **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:

Caremobile Account Number & Caremobile Account Name refers to the nominated billing account for the provision of Caremobile telecommunication services to which the direct debit facility is linked;

**Third Party** means a party that is not a party to the Agreement

We means Caremobile P/L (Trading As Caremobile) and

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

For full details refer Our Direct Debit Policy available at: www.caremobile.com.au

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