HSBC

Direct Debit Loan Authority

Date / /

1. Only to be completed if you are using another bank to make payments to your HSBC Loan Account.
2. Complete white boxes in clear writing.
3. **Return completed original form to HSBC, Auckland Loan Processing Centre, P.O. Box 5947 Wellesley Street, Auckland 1010.**
4. Keep duplicate copy for your own records.
5. If you need help with this form please contact our Direct Service Center on 0800 80 23 80.

CUSTOMER DETAILS

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Dr ☐ Other ☐ Last name or Corporate name

First Name/s		
Address		
Town, City or District		Post Code

DETAILS OF YOUR ACCOUNT THAT WILL BE DEBITED

Account Holder(s) Name

Account Number

Bank - Branch Number - Account Number - Suffix

Authority to accept Direct Debits
(Not to operate as an assignment or agreement)

To: The Manager

Bank		Branch	

DETAILS OF YOUR ACCOUNT THAT WILL BE CREDITED

HSBC Account Number

Branch Number: 3 0 2 9 - Account Number: 0 - Suffix: 0

Account Name

AUTHORISATION

I/We authorise you until further notice in writing to debit my/our account with you all amounts that HSBC, **(hereinafter referred to as the Initiator)** the registered Initiator of the above Authorisation Code, may initiate by Direct Debit.
I/We acknowledge and accept the terms and conditions, and that the Bank accepts this Authority only upon the conditions listed on the reverse of this form.

Details to appear on my/our bank statement:

Particulars: H S B C

Payer code (HSBC Account Number)

Payer Reference: D I R E C T D E B I T

Account Holder(s) Name		
Authorised Signature(s)		
Authorised Signature(s)		
Authorised Signature(s)		
Authorised Signature(s)		

FOR BANK USE ONLY

APPROVED
0006
05/03

Retain at branch

Date received:	Recorded by:	Checked by:

BANK STAMP

NZM67R1 (0906)