

CLIENT DETAILS

Name of my account to be debited (acceptor)																Initiator's Authorisation Code			
Name of my bank																0661546			
Bank	0	0	Branch	0	0	0	0	Account	0	0	0	0	0	0	SUF	0	0	0	Approved
																		6154	04/16

From the acceptor to _____ [insert name of acceptor's bank] _____ (my bank):

I authorise you to debit my account with the amounts of direct debits from CARTRACK NEW ZEALAND LIMITED with the authorisation code specified on this authority in accordance with this authority until further notice.

I agree that this authority is subject to:

- The bank's terms and conditions that relate to my account, and
- The specific terms and conditions listed below.

Please include the following information on my bank statement: _____

Full Name	Authorised signature/s:	Date:
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Full Name	Authorised signature/s:	Date:
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Specific conditions relating to notice and disputes:

I may ask my bank to reverse a direct debit up to 120 calendar days after the debit if:

- I don't receive a written notice of the amount and date of each direct debit from the initiator, or
- I receive a written notice but the amount or the date of debiting is different from the amount or the date specified on the notice.

The initiator is required to give you a written notice of the amount and date of each direct debit no less than 1 calendar days before the date of the debit.

If the bank dishonours a direct debit but the initiator sends the direct debit again within 5 business days of the dishonour, the initiator is not required to give you a second notice of the amount and date of the direct debit.