Direct Debit Authority

Name of my account to be debited (acceptor)

Name of my bank:

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bank		Branch				Account							Suffix		

Initiator's Authorisation Code

0133896

Approved

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 **PROHERB LTD** 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:

Authorised signature/s: Date:

_____ _____ ____/____/____

Specific conditions relating to notices 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 10 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.

Please return this completed form to ProHerb Ltd via: derekw@proherb.co.nz

Disclaimer:
Direct Debits can take approximately 10 business days to be established and become functional. Please ensure you have covered any payments which may fall overdue within this time frame.