

BANK DEBIT ORDER INSTRUCTION / CREDIT CARD AUTHORITY

Debtor's name:	_____	Date:	_____
Address:	_____ _____ _____	Merchant Ref no.:	_____
		Debit amount:	R199 (Excl VAT)
		Commencement date:	_____
Contact no:	_____	Abbreviated name as registered with the Bank:	Snappyclic

Dear Sirs/Madams,

I confirm that I am a fully authorised signatory in respect of the below bank account particulars (the "account"), and that I am duly authorised to issue and authorise this Debit Order instruction. The details of the account are as follows:

Accountholder	_____														
Bank	_____														
Branch Name	_____														
Branch No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>									
Account No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Account Type	<i>Current</i>		<input type="text"/>	<i>Savings</i>		<input type="text"/>	<i>Transmissions</i>		<input type="text"/>	<i>Other</i>		<input type="text"/>			

This signed Authority and Mandate refers to our contract as dated as on signature hereof (the "Agreement"). I / We hereby authorise you to issue and deliver payment instructions to the bank for collection against the abovementioned account at my / our above mentioned bank (or any other bank or branch to which I / We may transfer the account) on condition that the sum of such payment instructions will never exceed my / our obligations as agreed to in the Agreement, and commencing on the commencement date and continuing until this Authority and Mandate is terminated by me / us by giving you no less than twenty (20) ordinary working days' notice in writing, and sent by prepaid registered post or delivered to your address indicated above.

1. The individual payment instructions so authorised to be issued must be issued and delivered as follows:
 - 1.1. On the first (1st) day ("payment day") of each and every month commencing on _____
 - 1.2. In the event that the payment day falls on a Saturday, Sunday or recognized South African public holiday, the payment day will automatically be the very next ordinary business day.
2. I / We understand that the withdrawals hereby authorised will be processed through a computerized system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and if provided to you should enable you to identify the Agreement.
3. A payment reference is added to this form before the issuing of any payment instruction. I / We shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

MANDATE

I / We acknowledge that all payment instructions issued by you shall be treated by my/our above mentioned bank as if the instructions had been issued by me/us personally.

CANCELLATION

I / We agree that although this Authority and Mandate may be cancelled by me / us, such cancellation will not cancel the Agreement. I / We shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

ASSIGNMENT

I / We acknowledge that this Authority may be ceded to or assigned to a third party if the agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.

Signed at on this day of 20.....



DEBIT ORDER AUTHORISATION

.....
FULL NAME AND SURNAME (of Authorised signatory/Owner of the account) **(ID Number)**

.....
SIGNATURE (as used for signing cheques or credit card vouchers)

Assisted by: **AGREEMENT REFERENCE NUMBER**
[FOR OFFICE USE]

This Agreement reference number is: