

Direct Debit Request



Request and authority to debit the account named below to pay RedZed

Loan Number _____

Surname _____ Given Name(s) _____

Company Name _____ ACN/ABN _____
(If applicable) (If applicable)

Request and authorise RedZed to arrange for any amount RedZed may debit or charge you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below subject to the terms and conditions of the Direct Debit Request Service Agreement and any further instructions provided below.

Financial Institution Name _____

Financial Institution Address _____ State _____ Post Code _____
(If applicable)

Account Name(s) _____

BSB Number _____ - _____ Account Number _____

Payment Frequency

Monthly

Fortnightly
(Not available for Interest Only loans)


Weekly
(Not available for Interest Only loans)

Payment Amount

Minimum amount payable

Minimum amount payable plus fixed additional amount of \$ _____

Fixed amount of \$ _____

 **Please note, the first payment you must make is a monthly payment on the same day one calendar month after settlement day. The following payments will be weekly, fortnightly or monthly as you have requested.**

By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and RedZed (User ID 302541) as set out in this Request and in your Direct Debit Request Service Agreement.

Borrower/Guarantor Signatures

Full name of Borrower/Guarantor 1

Full name of Borrower/Guarantor 2

Capacity _____
(If signing for a company, sign and print full name and capacity for signing. eg, Director)

Capacity _____
(If signing for a company, sign and print full name and capacity for signing. eg, Director)

Signature _____ Date ____/____/____

Signature _____ Date ____/____/____

Full name of Borrower/Guarantor 3

Full name of Borrower/Guarantor 4


Capacity _____
(If signing for a company, sign and print full name and capacity for signing. eg, Director)

Capacity _____
(If signing for a company, sign and print full name and capacity for signing. eg, Director)

Signature _____ Date ____/____/____

Signature _____ Date ____/____/____

 **Note: Your settlement could be delayed if you do not provide full contact details. All borrowers/guarantors must provide wet signature(s) for this form to be valid**

 **Complete and return this form to:**

Email clientservices@redzed.com
Fax 1300 722 097

Mail RedZed Lending Solutions
GPO Box 1693, Melbourne VIC 3001

Direct Debit Service Agreement

Terms and conditions For Direct Debit Request

Definitions

Account	means the account held at <i>Your Financial Institution</i> from which <i>We</i> are authorised to arrange for funds to be debited.
Agreement	means this Direct Debit Request Service Agreement between <i>You</i> and <i>Us</i> .
Business Day	means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.
Debit Day	means the day that payment by <i>You</i> to <i>Us</i> is due.
Debit Payment	means a particular transaction where a debit is made.
Direct Debit Request	means the Direct Debit Request between <i>Us</i> and <i>You</i> .
Us or We	means RedZed Lending Solutions Pty Ltd, "RedZed" ABN 31 123 588 527, and its related entities.
You	means the customer who signed the <i>Direct Debit Request</i> .
Your Financial Institution	is the financial institution where <i>You</i> hold the account that <i>You</i> have authorised <i>Us</i> to arrange to debit.

Debiting your Account

- 1.1 By signing a *Direct Debit Request*, *You* have authorised *Us* to arrange for funds to be debited from your Account. *You* should refer to the *Direct Debit Request* and this Agreement for the terms of the arrangement between *Us* and *You*.
- 1.2 We will arrange for funds to be debited from your Account as authorised in the *Direct Debit Request*.
- 1.3 If the *Debit Day* falls on a day that is not a *Business Day*, We may direct *Your Financial Institution* to debit your Account on the immediately following *Business Day*. If *You* are unsure about which day your Account has or will be debited *You* should ask *Your Financial Institution*.
- 1.4 In the event of a *Direct Debit Request* not being honoured, *We* may seek to again debit your Account for the failed payment and related costs at our discretion.

Changes by Us

- 2.1 We may vary any details of this Agreement or a *Direct Debit Request* at any time by giving *You* at least fourteen (14) days' written notice.

Changes by You

- 3.1 Subject to 3.2 and 3.3, *You* may change the arrangements under a *Direct Debit Request* by contacting *Us* on 1300 722 462.
- 3.2 If *You* wish to stop or defer a *Debit Payment* *You* must notify *Us* in writing at least 3 days before the next *Debit Day*. This notice should be given to *Us* in the first instance.
- 3.3 *You* may also cancel your authority for *Us* to debit your Account at any time by giving *Us* 15 days notice in writing before the next *Debit Day*. This notice should be given to *Us* in the first instance.

Your obligations

- 4.1 It is your responsibility to ensure that there are sufficient clear funds available in your Account to allow a *Debit Payment* to be made in accordance with the *Direct Debit Request*.
- 4.2 If there are insufficient clear funds in your Account to meet a *Debit Payment*:
 - (a) *You* may be charged a fee and/or interest by *Your Financial Institution*;
 - (b) *You* may also incur fees or charges imposed or incurred by *Us*; and
 - (c) *You* must arrange for the *Debit Payment* to be made by another method or arrange for sufficient clear funds to be in your Account by an agreed time so that *We* can process the *Debit Payment*.

4.3 *You* should check your Account statement to verify that the amounts debited from your Account are correct.

4.4 If *We* are liable to pay goods and services tax ("GST") on a supply made in connection with this agreement, then *You* agree to pay *Us* on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

Disputes

- 5.1 If *You* believe that there has been an error in debiting your Account, *You* should notify *Us* directly on 1300 722 462 and confirm that notice in writing with *Us* as soon as possible so that *We* can resolve your query more quickly.
- 5.2 If *We* conclude as a result of our investigations that your Account has been incorrectly debited *We* will respond to your query by arranging for *Your Financial Institution* to adjust your Account (including interest and charges) accordingly. *We* will also notify *You* in writing of the amount by which your Account has been adjusted.
- 5.3 If *We* conclude as a result of our investigations that your Account has not been incorrectly debited *We* will respond to your query by providing *You* with reasons and any evidence for this finding.
- 5.4 Any queries *You* may have about an error made in debiting your Account should be directed to *Us* in the first instance so that *We* can attempt to resolve the matter between *Us* and *You*. If *We* cannot resolve the matter *You* can still refer it to *Your Financial Institution* which will obtain details from *You* of the disputed transaction and may lodge a claim on your behalf.

Accounts

- 6.1 *You* should check:
 - (a) with *Your Financial Institution* whether direct debiting is available from your Account as direct debiting is not available on all accounts offered by financial institutions.
 - (b) *Your Account* details which *You* have provided to *Us* are correct by checking them against a recent Account statement; and
 - (c) With *Your Financial Institution* before completing the *Direct Debit Request* if *You* have any queries about how to complete the *Direct Debit Request*.

Confidentiality

- 7.1 We will keep any information (including your Account details) in your *Direct Debit Request* confidential. We will make reasonable efforts to keep any such information that We have about *You* secure and to ensure that any of our employees or agents have access to information about *You* do not make any who unauthorised use, modification, reproduction or disclosure of that information.
- 7.2 We will only disclose information that We have about *You*:
 - (a) to the extent specifically required by law; or
 - (b) for the purposes of this Agreement (including disclosing information in connection with any query or claim).

Notice

- 8.1 If *You* wish to notify *Us* in writing about anything relating to this Agreement, *You* should write to:
RedZed Lending Solutions Pty Ltd
GPO Box 1693, Melbourne, Victoria 3001.
- 8.2 We will notify *You* by sending a notice in the ordinary post to the address *You* have given *Us* in the *Direct Debit Request*.
- 8.3 Any notice will be deemed to have been received two business days after it is posted.