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 Postnet Suite 297 • P/Bag X0001 • Ballito • 4420
 Account Enquiries: 079 436 5547 •
 cathy@peaceagency.org.za
 NPO 088 / 756 • PBO 930036293

Debit Authorisation Form

Our registered details

Company Name	The Peace Agency	Reg#:	NPO 088 -756
Abbrev with Bank	PEACE		
Address	21 Malachite Crescent, Brettenwood Coastal Estate, Sheffield Beach		

Your details

Full Name	
Telephone	
Email	

Project Supporting	The Baby Home	BabyLine	All Projects
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Account Holder Name			
Bank Name			
Branch Name & No			
Account Number			
Type of Account	Current (cheque)	Savings	
Debit order date	1 st of every month	Amount	

This signed Authority and Mandate refers to our contract dated _____ ("the Agreement"), for the amount of _____.

FOR OFFICE USE Agreement reference number: _____

If you would prefer to set up your own monthly payment:
 The Peace Agency | FNB | 22 04 26 | 6271 805 6874

I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank (or any other Bank or branch to which I/we may transfer my/our 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 _____ and continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing of not less than 10 ordinary working days, and sent by email, prepaid registered post or delivered to your address as indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows: **Monthly (to be deducted on the 1st of each month)**

In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the very next ordinary business day.

I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that details of each withdrawal will be printed on my Bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This number must be added to this form in Section A before the issuing of any payment instruction.

Mandate

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

I/We agree to pay any penalty bank charges relating to this debit order instruction.

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 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.