

	Hervey Bay Veterinary Surgery 3/162 Boat Harbour Dr Pialba, QLD 4655 (07) 4124 4679	<h2>Direct Debit Request</h2>
Request and Authority to debit the account named below to pay Hervey Bay Veterinary Surgery, User ID 478268		
Request and Authority to debit	<p> Your Surname _____ Your Given names _____ "you" Your Pets name(s) _____ Email address _____ </p> <p>request and authorise Hervey Bay Veterinary Surgery to arrange, through its own financial institution, a debit to your nominated account any amount Hervey Bay Veterinary Surgery, has deemed payable by you.</p> <p>This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from <i>your</i> account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.</p>	
Insert the name and address of financial institution at which account is held	<p> Financial institution name _____ Address _____ _____ </p>	
Insert details of account to be debited	<p> Name/s on account _____ BSB number (Must be 6 Digits) _ _ _ _ _ - _ _ _ _ _ Account number _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Frequency _____ Start Date _____ Amount _____ </p>	
Acknowledgment	<p>By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Hervey Bay Veterinary Surgery as set out in this Request and in your Direct Debit Request Service Agreement.</p>	
Insert your signature and address	<p> Signature _____ (If signing for a company, sign and print full name and capacity for signing eg. director) Address _____ _____ Date ___ / ___ / ___ </p>	
Second account signatory (if required)	<p> Signature _____ (If signing for a company, sign and print full name and capacity for signing eg. director) Address _____ _____ Date ___ / ___ / ___ </p>	