



ENAGIC AUSTRALIA PTY LTD
 ABN: 64141 931 919
 Suite 15 33 WATERLOO ROAD
 MACQUARIE PARK NSW 2113
 Tel: 02 9878 1100
 Fax: 02 9878 1200

Direct Debit Request

**Request and Authority to debit the account named below to pay
 ENAGIC AUSTRALIA PTY LTD**

Request and Authority to debit	<p>Your Surname or company name _____</p> <p>Your Given names or ABN/ARBN _____ "you"</p> <p>request and authorise ENAGIC AUSTRALIA PTY LTD & User ID:465655 to arrange, through its own financial institution, a debit to your nominated account any amount ENAGIC AUSTRALIA PTY LTD, has deemed payable by <i>you</i>.</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 _____</p> <p>Address _____</p> <p>_____</p>
Insert details of account to be debited	<p>Name/s on account _____</p> <p>BSB number (Must be 6 Digits) _ _ _ _ - _ _ _ _ </p> <p>Account number _ _ _ _ _ _ _ _ _ _ _ _ _ _ </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 ENAGIC AUSTRALIA PTY LTD as set out in this Request and in your Direct Debit Request Service Agreement.</p>
Insert your signature and address	<p>Signature _____</p> <p>(If signing for a company, sign and print full name and capacity for signing eg. director)</p> <p>Address _____</p> <p>_____</p> <p>Date ___ / ___ / ___</p>
Second account signatory (if required)	<p>Signature _____</p> <p>(If signing for a company, sign and print full name and capacity for signing eg. director)</p> <p>Address _____</p> <p>_____</p> <p>Date ___ / ___ / ___</p>