

1. The Initiator

- (a) Has agreed to give written advance notice to the Acceptor of the net amount of each Direct Debit and the due date of the debiting **at least 10 calendar days before** (but not more than 2 calendar months) the date when the Direct Debit will be initiated. This advance notice must be provided either:
- (i) in writing; or
 - (ii) by electronic mail where the Customer has provided prior written consent to the Initiator.

The advance notice will include the following message: "Unless advice to the contrary is received from you by (date*), the amount of \$....., will be direct debited to your Bank account on (initiating date)."

*This date will be at least two (2) days prior to the initiating date to allow for amendment of Direct Debits.

Or

- (a) Has agreed to send notice of the net amount of each Direct Debit no later than the day the Direct Debit is initiated. This notice will be provided either:
- (i) in writing; or
 - (ii) by electronic mail where the Customer has provided prior written consent to the Initiator.
- The notice will include the following message: "The amount \$....., was direct debited to your Bank account on (initiating date)."
- (b) May, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.

2. The Customer may:

- (a) At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator.
- (b) Stop payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank.
- (c) Where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of 1(a) above, request the Bank to reverse or

alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of the Direct Debit back to the Initiator through the Initiator's Bank, PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.

3. The Customer acknowledges that:

- (a) This Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy, or other revocation of this Authority until actual notice of such event is received by the Bank.
- (b) In any event this authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
- (c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other dispute lies between me/us and the Initiator.
- (d) Where the Bank has used reasonable care and skill in acting in accordance with this authority, the Bank accepts no responsibility or liability in respect of:
 - the accuracy of information about Direct Debits on Bank statements.
 - any variations between notices given by the Initiator and the amounts of Direct Debits.
- (e) The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give written advance notice correctly nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.

4. The Bank may:

- (a) In its absolute discretion conclusively determine the order of priority of payment by it or any monies pursuant to this or any other authority, cheque or draft properly executed by me/us and given to or drawn on the Bank.
- (b) At any time terminate this Authority as to future payments by notice in writing to me/us.
- (c) Charge its current fees for this service in force from time-to-time.



Nelson City Council

te kaunihera o whakatū

PO Box 645 Nelson 7040

03 546 0200

www.nelsoncitycouncil.co.nz

EASYPAY

Pay your rates or water bill automatically the easy way – by direct debit

Nelson City Council Easypay is the easy way to pay your rates and/or water account -it is a direct debit system that allows you to pay your accounts automatically from your bank account, saving you time and money.

How it will help me?

Provided your payments are regular and you do not miss any, you will not incur any late payment penalties. Nelson City Council Easypay also allows you to spread your current year's rates and/or water account payments.

How does it work?

Payments will be automatically deducted from your bank account. You select a weekly, fortnightly, monthly, quarterly, yearly and six-monthly option for water. Weekly and fortnightly payments can be processed either on a Tuesday or Thursday. Monthly payments will be processed on the 20th of the month and quarterly payments will be processed on the due date on the account. Six-monthly payments of water accounts will be processed on the due date as shown on each invoice.

A letter will be sent to you giving details of payment amounts and date of your first payment deduction. You will receive your accounts as usual for your information.

Once in place, there are no more forms to complete. Nelson City Council Easypay continues each year until it is cancelled. Just ensure there is enough money in your bank account to match the regular deduction.

What else does Nelson City Council Easypay offer me?

Easypay is flexible, offering you various payment options. This means you are in control of when your accounts are paid. It is a reliable and convenient system for ensuring that your accounts are always paid on time. Easypay requires no further effort once you have completed the direct debit authority form attached -no need to write out cheques, handle cash or post money.

How do I find out more?

If you need more information please contact our Customer Services Team on (03) 546 0200.

What do I do now if I want to use the Nelson City Council Easypay system?

Simply complete the details on the attached form and send to:

Post Freepost 76919
Nelson City Council
PO Box 645
Nelson 7040

How to Fill in the Direct Debit Authority Form

Nelson City Council
te kaunihera o whakatū

PO Box 645 Nelson 7040 03 546 0200
www.nelsoncitycouncil.co.nz

EASYPAY

I/We wish to make payments:

RATES PAYMENT OPTIONS

Weekly Tuesday Fortnightly Tuesday
 Thursday Thursday

Monthly Quarterly Yearly *Less Discount August*

WATER PAYMENT OPTIONS

Weekly Tuesday Fortnightly Tuesday
 Thursday Thursday
 Monthly 6 Monthly

Valuation Number: **1**
Water Billing Number:
Other Account Number:

Location of Property: **2**
(IF MORE THAN ONE PROPERTY BEING PAID FOR, PLEASE ATTACH ADDITIONAL ADDRESSES)

Ratepayer name: **3**
Phone Home ()
Phone Cell ()
Phone Business ()

FOR NCC USE ONLY:
Start Date: _____
Calculation: _____
W/F/M/Q Amount: _____

5 NAME (of Bank Account Holder):
BANK ACCOUNT FROM WHICH PAYMENTS ARE TO BE MADE

6 Bank Branch Number Account Number Suffix

7 BANK: BRANCH:

I/We authorise you until further notice to debit my/our account with you all amounts which **NELSON CITY COUNCIL** (hereinafter referred to as the Initiator) the registered Initiator of the above Authorisation Code, may initiate by Direct Debit. I/We acknowledge and accept that the bank accepts this authority only upon the conditions listed below.

INFORMATION TO APPEAR ON MY/OUR BANK STATEMENT (To be completed by the Initiator)

PAYER PARTICULARS PAYER CODE PAYER REFERENCE

8 YOUR SIGNATURE (S) DATE

For Bank Use Only
Original - Retain at Branch

Approved 0084
12 10

Date Received: Recorded by: Checked by:

BANK STAMP

CONDITIONS OF THIS AUTHORITY TO ACCEPT DIRECT DEBITS

1. The Initiator
(a) Has agreed to give written advance notice to the
Accepter of the net amount of each Direct Debit and the due date of the debiting at **least 10 calendar days before** (but not more than 2 calendar months) the date when the Direct Debit will be initiated. This advance notice must be provided either: (i) in writing; or (ii) by electronic mail where the Customer has provided prior written consent to the Initiator.
The advance notice will include the following message:
"Unless advice to the contrary is received from you by (date)", the amount of \$....., will be direct debited to your Bank account on (initiating date)."
*This date will be at least two (2) days prior to the initiating date to allow for amendment of Direct Debits.
Or
(a) Has agreed to send notice of the net amount of each Direct Debit no later than the day the Direct Debit is initiated. This notice will be provided either: (i) in writing; or (ii) by electronic mail where the Customer has provided prior written consent to the Initiator.

The notice will include the following message:
"The amount \$..... was direct debited to your Bank account on (initiating date)."
(b) May, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.
2. The Customer may:
(a) At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator.
(b) Stop payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank.
(c) Where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of 1(a) above, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of the Direct Debit back to the Initiator through the Initiator's Bank, PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.
3. The Customer acknowledges that:
(a) This Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.
(b) In any event this authority is subject to any arrangements now or hereafter existing between me/us and the Bank in relation to my/our account.
(c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other dispute lies between me/us and the Initiator.
(d) Where the Bank has used reasonable care and skill in acting in accordance with this authority, the Bank accepts no responsibility or liability in respect of:
-the accuracy of information about Direct Debits on Bank statements.
-any variations between notices given by the Initiator and the amounts of Direct Debits.
(e) The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give written advance notice correctly nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.
4. The Bank may:
(a) In its absolute discretion conclusively determine the order of priority of payment by it or any monies pursuant to this or any other authority, cheque or draft properly executed by me/us and given to or drawn on the Bank.
(b) At any time terminate this Authority as to future payments by notice in writing to me/us.
(c) Charge its current fees for this service in force from time-to-time.

Return this form:
Post Freepost 76919
Nelson City Council
PO Box 645
Nelson 7040

For more information please phone 03 546 0200.

Please complete all highlighted sections marked 1 to 8.

Part A – From your Rates Instalment Notice and/or Water Account, define the property you wish to pay your rates and/or water account for.

1 Enter Valuation Number of your property. This reference is shown on your rates Instalment Notice (Please list all property numbers and addresses you wish to pay for by this method).

1(a) Enter Water Billing Number. This number is shown on your water invoice if you have it.

2 Location of property

3 Advise Ratepayer Name and daytime phone numbers

4 Select your preferred payment option for rates and/or water

Part B – The purpose of this section is to provide your bank with the authority to allow the Council to debit your account for payments.

5 Enter the name of the bank account from which you want the payments to be made.

6 Enter the details of the bank account number.

7 Enter your bank's details.

8 Finally, the person from whose account the payment is to be made must sign here.

When you complete the form

Simply complete the details on the attached form and send to:

Post Freepost 76919
Nelson City Council
PO Box 645
Nelson 7040

Important notes

If this EasyPay authority is to replace an existing automatic payment, please contact your bank and cancel the existing automatic payment authority as soon as possible.

The form must be lodged with the Council first, not with your bank. We will lodge it with your bank. Following acceptance by your bank, the Council will advise you of your Direct Debit amounts and due dates – that is why there is no amount on the form.

**PART
A**

EASYPAY Debit Form

Direct

Valuation Number: _____

Water Billing Number: _____

Other Account Number: _____

Location of Property: _____

(If more than one property being paid for, please attach additional addresses)

RATES PAYMENT OPTIONS

I/We wish to make payments

Weekly Tuesday Thursday Monthly Quarterly Yearly

Fortnightly Tuesday Thursday Less Discount, August

WATER PAYMENT OPTIONS

I/We wish to make payments

Weekly Tuesday Thursday Monthly 6 Monthly

Fortnightly Tuesday Thursday

Ratepayer name: _____

Phone Home () _____

Phone Cell () _____

Phone Business () _____

FOR NCC USE ONLY:

Date Received: _____ Start Date: _____ Calculation: _____

Date Processed: _____ W/F/M/Q Amount: _____

BANK INSTRUCTIONS

NAME: _____
(Of Bank Account Holder)

AUTHORITY TO ACCEPT DIRECT DEBITS
(not to operate as an assignment or agreement)

BANK ACCOUNT FROM WHICH PAYMENTS TO BE MADE

AUTHORISATION CODE:
2 7 0 0 8 4 2

Bank		Branch Number				Account Number				Suffix			

To the Bank Manager

BANK: _____

BRANCH: _____

I/We authorise you until further notice to debit my/our account with you all amounts which

**PART
B**

NELSON CITY COUNCIL

(hereinafter referred to as the Initiator)

the registered Initiator of the above Authorisation Code, may initiate by Direct Debit.
I/We acknowledge and accept that the bank accepts this authority only upon the conditions listed on the reverse of the form.

INFORMATION TO APPEAR ON MY/OUR BANK STATEMENT (To be completed by the Initiator)

PAYER PARTICULARS	PAYER CODE	PAYER REFERENCE

YOUR SIGNATURE (S) _____ DATE _____

Approved
0084
12 | 10

Date Received:	Recorded by:	Checked by:
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BANK STAMP