

Debit Order Authorisation

Date: _____

Fax 0860 588 588 or email it to existingbusinessadmin@fnb.co.za

Customer Details			
Title	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof. <input type="checkbox"/>		
Name and Surname			
Identification number			
Home loan account number			
VAT registration no.			
Debit order details			
I hereby authorise FirstRand Bank Limited Registration Number 1929/001225/06 its order, successors in title or assigns ("the lender") to debit my account at:			
Name of Bank		Account number	
Account name		Branch code	
Branch name / Town		Account Type	Cheque <input type="checkbox"/> Savings <input type="checkbox"/> Transmission <input type="checkbox"/>
Identification Number of Bank Account Holder			
Mandate Type	USAGE BASED		
This authorisation allows the lender to use various types of debit orders. A copy of the first page of your bank statement must be returned to the lender together with this Debit Order Authorisation (please note that Internet print-outs are not accepted).* In addition, if the debit order account holder is a third party:- A copy of the third party's identity document must be attached OR if the third party is a juristic entity, a signed copy of the applicable registration document as well as an original juristic resolution, authorising a designated signatory to enter into a debit order agreement must be attached.			
Repayment Amount	R		
Amount in words			
Maximum Repayment Amount	Double your repayment amount.		
Transaction Description on Bank Statement	FNB H/LOAN		
I select the ____ day of each month as the day on which the debit order is to be processed.			
Date of First Payment		Date of Last Payment	On the date the last repayment amount is due.
Terms and Conditions			
<ul style="list-style-type: none"> • This mandate will remain in full force until all amounts owed by the home loan account holder to the lender have been repaid in full. • This mandate only reflects the interest and capital reduction amount for this bond. It does not include any fees, insurance or assurance premiums. A repayment letter will be sent to the home loan account holder after registration of this bond, which will reflect the full repayment amount. • The lender may from time to time change the interest, fees and charges amounts, time for payment and how often the lender can charge these. The lender will give the home loan account holder at least 5 (five) business days' notice of the change. • The undersigned party/parties agree to the lender deducting the amounts due (repayment and arrear amounts) from the debit order account until this credit agreement has been paid in full. If there are insufficient funds, the lender will track this debit order account and deduct the payments due (which includes the repayment and arrear amounts) once funds are available. By tracking the debit order account, the lender may be able to stop default on the credit agreement. Default may lead to legal action or negative credit bureaux listings. • For changes to this mandate, the undersigned party/parties understand that the new instruction will not be processed if the current debit order is due to be processed within 3 (three) days of the lender receiving this request. • The undersigned party/parties authorise the financial institution at which the debit order account is held to debit the debit order account with the amounts drawn by the lender. • The undersigned party/parties agree that the repayment date may change and may be aligned to the date the debit order account holder receives his/her salary. • If the repayment date falls on a non-processing day (like Saturday, Sunday or official public holiday), the undersigned party/parties agree that the lender may process the payment on the preceding business day. • If this is a third party debit order and the third party debit order is cancelled, it is the obligation of the home loan account holder to implement the required debit order for the full and continuous fulfilment of repayments of his/her/their home loan. 			
_____	_____		
Signature of home loan account holder	Signature of home loan account holder		
_____	_____		
Signature of debit order account holder	Date		



Company, Close Corporation, Trust or Association (if applicable)

If this facility is in the name of a Company, Close Corporation, Trust or Association the full names of such entity and the capacity of the signatory must be reflected.

Name of Company, Close Corporation, Trust or Association

Full Name/Surname in BLOCK letters

Capacity

Date

Signature