



# Direct Debit Request

Please print in BLOCK LETTERS with a black or blue pen

This form is to be completed and signed by a tenant or other household member to allow the Department of Family and Community Services (FACS) to create, vary or cancel direct debit payments for rent, or other charges from their bank account. This form replaces any previous direct debit request. For information or assistance with this form, phone **1800 422 322**, 24 hours a day, seven days a week. Please mark relevant boxes with a . If you need more room to answer any questions, please include details on a separate page and attach it to this form.

Client reference number <input type="text"/>	T-File number <input type="text"/>	Payment reference number <input type="text"/>
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## Details of main applicant

Title   
Mr, Mrs, Ms, Miss

Last name or family name

Given name (s)

Unit/House number  Street/Avenue

Town/Suburb  Postcode

Phone  Mobile

Email address

## Details of account to be debited

Bank or Credit union name ( please print)

Address

Street number  Street/Avenue

Town/Suburb  Postcode

Account name ( please print)

BSB number  -

Account number

## Section 1: New deduction or variation of existing deduction

(only complete if requesting a new deduction or variation of an existing deduction)

I authorise **FACS (Debit User ID number 01449)**, until further notice in writing to arrange for funds to be debited from my account, as described above, in accordance with the amounts which FACS may debit or charge me through the Direct Debit System.

### Deductions

Frequency of deductions (please tick)  Weekly  Fortnightly

When would you like the payments to commence?

### Account/s to be credited

Account	Payment reference number	Amount
Rent		\$
Water		\$
Rechargeable repairs		\$
Combined former tenancy debt		\$
Miscellaneous		\$
Rental bond		

## Section 2: Termination of direct debit

(only complete if requesting termination of an existing deduction)

Please stop my payments from the first direct debit due on or after:

DD / MM / YYYY

### Customer service agreement

#### FACS responsibilities

- FACS shall send you a quarterly statement of your rent account.
- Where the due date falls on a non-business day, FACS will draw the amount on the next business day.
- FACS will automatically update the amount to be deducted during a Group Subsidy Review and Market Rent Review to reflect the new charges in rent and water from the next available pay date.
- FACS will provide written notice of any proposed changes to your direct debit arrangement, providing reasonable notice.
- FACS reserves the right to cancel the direct debit arrangement if drawings are continually returned unpaid by your nominated Financial Institution. Where drawings are returned unpaid FACS will arrange an alternative payment method with you. A fee may apply for drawings that are returned unpaid.
- FACS will keep all information provided by you and details of your nominated account at the financial institution, private and confidential.
- FACS will investigate and deal promptly with any queries, claims or complaints regarding debits, providing a response within 20 business days.

#### Client's responsibilities

- It is my responsibility to check with my/our financial institution prior to completing the Direct Debit Request form, that direct debiting is available on that account.
- It is my responsibility to ensure that the authorisation on the Direct Debit Request is identical to the account signing instruction held by the financial institution of the nominated account.
- It is my responsibility to ensure at all times, that sufficient funds are available in the nominated account to meet a drawing on the due date for payment.
- It is my responsibility to advise FACS if the account nominated by me to receive the drawings is altered, transferred or closed.
- It is my responsibility to arrange with FACS a suitable alternative payment method, if the drawing arrangements are stopped, either by me, or the nominated financial institution.
- It is my responsibility to meet any charges resulting from the use of the Direct Debit System. This may include fees charged as a result of returned drawings.
- I may request to defer, alter or stop the agreed drawing schedule, by giving written notice to FACS, as my nominated Financial Institution is unable to cancel my Direct Debit arrangement.
- I understand that all transaction disputes, queries and claims should be raised directly with FACS. FACS will provide a verbal or written response within 20 business days from the date of the notice. If the claim/dispute is successful, FACS will reimburse me by way of cheque or electronic credit to my nominated account.
- I have read the "Customer Service Agreement" above and acknowledge and agree with its terms and conditions.

Client's name

Client's signature

Date

DD / MM / YYYY

#### Office Use Only

Amount of total deduction

Frequency of deductions

Weekly

Fortnightly

Confirmation sent to client

Yes

No

DD / MM / YYYY

Direct Debit entered/updated

Yes

No

DD / MM / YYYY