

Direct Debit Authority

Authority to accept Direct Debits (Not to operate as an assignment or agreement)
Please complete and return to Cigna Life Insurance, Freepost 11 8004, PO Box 24031, Wellington 6142.

1. Your details

Please print your details clearly in CAPITAL letters using a pen

.....

First Name(s)

Surname

Address

Phone (Home) Phone (Work) Mobile

Premium Deduction Frequency (please tick one)
 Monthly Half-yearly Yearly

Deduction Start Date

Your Premium Deduction will occur on the same date each month, half year or year, as selected

or

Fortnightly

Deduction Start Date

Your Premium Deduction will occur on the same day of the week each fortnight

List all Cigna Policy number(s)

2. Banking details

.....

Name of account (customer to complete)

Please provide your branch number, account number and suffix of the account to be debited in the spaces provided below

Bank and branch number: Account number: Suffix:

Bank and branch

Address (PO Box) Town/City

AUTHORISATION CODE
0215843

Please attach an encoded deposit slip to ensure your account is loaded correctly.

3. Information to appear on my/our bank statement

I/We authorise you until further notice, to debit my/our account with all amounts which Cigna Life Insurance New Zealand Limited, PO Box 24031, Wellington (herein 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 the Authority only upon the conditions on the reverse of this form.

Payer particulars Payer code Payer reference

Signature(s) Date / /

Bank use only - original retain at branch

For Office use only

DD Authority sent to bank

Initial

Date

Approved	
1584	
06	08

Date Received

Recorded by

Checked by

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Conditions of this authority

1. The Initiator

- (a) Has agreed to give advance Notice of the net amount of each Direct Debit and the due date of debiting at least ten calendar days before (but not more than two calendar months) the date the Direct Debit will be initiated. This notice will be provided either:
 - (i) in writing; or
 - (ii) by any other means which provides a verifiable record of the initiated transaction and 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 directly debited to your Bank account on (initiating date).”

* This date will be at least two days prior to the due date to allow for amendment of Direct Debits.

- (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.

3. The Customer acknowledges that:

- (a) This Authority will remain in full force and effect in respect of all Direct Debits made from 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 disputes lie 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 of 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.