



Administration Phone: 027 808 1771
admin@rvr.org.nz

Direct debit authority

*My account to be debited(acceptor)

Name of my bank:

Bank	Branch	Account	Suffix

Initiator's authorisation code

0	3	4	2	0	4	9
---	---	---	---	---	---	---

Approved

4204	11/2022
------	---------

From the acceptor to their bank:

I authorise you to debit my account with the amounts of direct debits from Retirement Village Residents Association of New Zealand with the authorisation code specified on this authority until further notice.

I agree that this authority is subject to:

- the bank's terms and conditions that relate to my account, and
- the specific terms and conditions listed below.

Please include the following information on my bank statement:

--	--	--	--	--	--	--	--	--	--

Authorised signature/s: <hr style="border: 0; border-top: 1px solid black;"/>	Date: <hr style="border: 0; border-top: 1px solid black;"/> / /
--	--

Specific conditions relating to notices and disputes.

- I may ask my bank to reverse a direct debit up to 120 calendar days after the debit if:
 - I don't receive a written notice of the amount and date of each direct debit from the initiator, or
 - I receive a written notice but the amount or the date of debiting is different from the amount, or the date specified on the notice.
- The initiator is required to give you a written notice of the amount and date of each direct debit no less than 10 calendar days before the date of the debit.
- If the bank dishonours a direct debit but the initiator sends the direct debit a second time within 5 business days of the original direct debit, the initiator is not required to notify you a second time of the amount and date of the direct debit.

Instructions and Member Details

Completing the authority:

Print the form and complete all sections.
Sign the authority.

Scan the form in .pdf format.
Email to admin@rvr.org.nz

OR post to
RVResidents,
Private Bag 4707
Christchurch 8140

OR give to your
Village Contact

Important Instructions

***My account to be debited** above is your name on the account, not the type of account.

Read *Specific Conditions*.

Please Note:
Unfortunately we are unable to accept Direct Debits for **ASB** or **TSB** clients due to processing constraints.

New Member

Existing Member

Name _____

Village _____

Email _____

If *New Member* ticked a separate membership form should be completed or you can register online from rvranz.org.nz