

Direct Debit Action Request



Membership Details (PLEASE PRINT IN BLOCK LETTERS)

Membership name	Member number	
Home phone	Work phone	Mobile

Request Details (PLEASE PRINT IN BLOCK LETTERS)

Name of service provider	Date	From S account	Remitter no.

I request Australian Mutual Bank Ltd (AMBL) to: (please tick one option)

- Cancel the Direct Debit authorisations listed above. I am aware that I must instruct the service provider to stop the Direct Debit without delay
- Re activate the Direct Debit authorisation listed above
- Change the account type that the Direct Debit is deducted from as listed above
- Unauthorised Direct Debit. I authorise AMBL to investigate and ask the Direct Debit user to provide proof of authority.

Please Note: For Direct Debit cancellations, AMBL will endeavor to effect such cancellation of debits, however it accepts no responsibility for debits in process at the time of this request. For activation or account option, AMBL will endeavor to effect such debits, however it accepts no responsibility to process the debit if the account has insufficient funds. It is the account holders responsibility to ensure sufficient funds are available at the time of the debit request or the account holder may be charged a fee for dishonour or insufficient funds. AMBL may, in its absolute discretion, determine the order of payment for any Direct Debit requests received. AMBL has the right to deny or cancel payment of any Direct Debit request. For more information please refer to the Account and Access Facility Conditions of Use .

Signature

X	Date / /
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Signature

X	Date / /
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Office Use Only

- General notes loaded
- Letter sent to member
- Scan form to member number in BizeWeb

Operator name & no.	Date received
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