



incorporating FAE BREWIN HOME RENTALS

- Property Administration
- Sectional Title & Community Housing Management
- Property Rentals
- Property Sales

A Member of the National Association of Managing Agents
A Member of the Institute of Estate Agents of South Africa
Registered with the Estate Agency Affairs Board
Registered with the Council for Debt Collectors

PROPERTY MANAGEMENT DIVISION: ELECTRONIC DEBIT ORDER INSTRUCTION

Please be advised that by completing the debit order instruction you are legally requesting that your bank account be debited on a monthly basis with the full amount owing on your account.

This form will be used to update or change owner Information.

Please complete in full and tick where required

IMPORTANT: This form, and written notification of any changes in the banking details reflected herein, must be received by Bellbuoy's offices before the 10th of the month prior to the commencement of payments and/or any required changes to details.

IN FAVOUR OF THE PROPERTY KNOWN AS

(Please complete as detailed on your Statement OR Contribution Insurance Schedule)

REFERENCE No.

UNIT No.

ERF No.

CLIENT DETAILS

NAME & SURNAME

ADDRESS

TELEPHONE

CODE

NUMBER

CELL No.

FACSIMILE

CODE

NUMBER

E-MAIL

BANK ACCOUNT DETAILS

BANK

BRANCH

BRANCH CODE

ACCOUNT No.

ACCOUNT TYPE

Cheque

Savings

Transmission

NAME & SURNAME OF ACCOUNT HOLDER

DEDUCTION DATE: 1st or next working day in the month

OR

25th or next working day in the month

A. Authority

This signed Authority and Mandate refers to our contract dated: _____ ("the Agreement").

I/We hereby authorise The Bellbuoy Group to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank (or any other bank or branch to which I/we may transfer my/our account) the full amount owing on my account, on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on _____ and continuing until this Authority and Mandate is terminated by me/us by giving notice in writing of not less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address as indicated above or by email..

The individual payment instructions so authorised to be issued and delivered monthly. In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the very next working business day.

I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that details of each withdrawal will be printed on my bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This reference number must be added to this form before the issuing of any payment instruction.

Bellbuoy (Pty) Limited t/a The Bellbuoy Group - Company Registration No. 2012/019786/07

VAT Reg. No. 4170168118 - Debt Collector's Certificate No. 0049099/11 - NAMA Membership No. 1001

Directors: GS McWilliams, MC White, GD Moore-Barnes (Chairman), C van Heerden (Managing), S Moore-Barnes (Managing)

P O Box 7660, Newton Park, 6055 - 1st Floor KPMG House, Norvic Drive, Greenacres, Port Elizabeth 6001

Website: www.bellbuoy.co.za - Telephone: 041 374 4444 - Facsimile: 041 374 2444

Satellite Office: 3 Oosterland Street, Jeffreys Bay, 6330 - Telephone: 042 293 3797

B. Mandate

I/We acknowledge that all payment instructions issued by you shall be treated by my/our above- mentioned Bank as if the instructions have been issued by me/us personally.

C. Cancellation

I/We agree that although this Authority and Mandate may be cancelled by me/us, such cancellation will also cancel the Agreement. I/We shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force, if such amounts were legally owing to you. I/We accept that I/we shall be liable for any costs should a Debit Order not be honoured by our nominated financial institution. Should a Debit Order be rejected, the necessary action and limitations of Electronic Funds Transfer Unpaid Reason Codes And Actions will be applied.

D. Assignment

I/We acknowledge that this Authority may not be ceded or assigned to a third party.

Signed at _____ on this ____ day of _____ (Month/Year) Signature _____
(Signature as used for operating on the account)

Please forward completed form to: Client Systems & Financial Administration Division,
Fax: 041 374 2444 e-mail: bellbuoy@bellbuoy.co.za

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