



35 Pansy Street, Winchester Hills, 2091  
Tel: 682-1010, Cell: 084 840 2332, E-mail: aquajunctionswim@telkomsa.net  
VAT No. 451 018 1789

DEBIT INSTRUCTION / CREDIT CARD AUTHORITY

CREDIT CARD AUTHORITY

Name (Debtor): \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Debit Amount: \_\_\_\_\_

\_\_\_\_\_

Commencement Date: \_\_\_\_\_

\_\_\_\_\_

Abbreviated name as registered with

Contact No.: \_\_\_\_\_

the bank: AQUAJUNCTI

Dear Sirs/Madams

The details of my bank account are as follows:

DEBIT INSTRUCTION

CREDIT CARD AUTHORITY

BANK: \_\_\_\_\_

CARD HOLDERS NAME: \_\_\_\_\_

BRANCH / TOWN: \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_

BRANCH NO.: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_

ACCOUNT NAME: \_\_\_\_\_

CVV NUMBER \_\_\_\_\_

(three digit number on back of card)

ACCOUNT NO.: \_\_\_\_\_

TYPE OF A/C: \_\_\_\_\_

CARD TYPE \_\_\_\_\_

(savings, current, transmission)

(master card or visa)

This signed Authority and Mandate refers to our contract as dated as on signature hereof "the Agreement". I / We hereby authorise you to issue and deliver payment instructions to the bank for collection against my / our abovementioned account at my / our above mentioned bank (or any other bank or branch to which I / We may transfer my / Our 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 the commencement date and continuing until this Authority and Mandate is terminated by me / us by giving you notice in writing of no less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows:

I, on the \_\_\_\_\_ day ("payment day") of each and every month commencing on \_\_\_\_\_. In the event that the payment day falls on a Saturday, Sunday or recognised South African public holiday, the payment day will automatically be the very next ordinary business day. Further, if there are insufficient funds in the nominated account to meet the obligation, you are entitled to track my account and re-resent the instruction for payment as soon as sufficient funds are available in my account.

Signed \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.