HEARTLAND BANK

Authority for automatic payments

Account information

Note: To ensure payments are processed, sufficient cleared funds must be in the account 1 day prior to the payment's due date.

Account number

Bank | Branch | Account | Suffix

Name of account

Information to appear on my/our account

Payment details

Date of first payment

Payment frequency

Amount of regular payments $

Amount in words

Date of final payment

☐ until further notice

Amount of final payment $

Amount in words

Payment to be made to:

Account number

Bank | Branch | Account | Suffix

Payee name

Information to appear on payee's bank statement

Particulars

Code

Reference

Conditions

I/We understand and accept that Heartland Bank Limited (Heartland Bank) accepts this Authority only upon the following conditions, namely:

1. Heartland Bank will endeavour to effect such automatic payments without any responsibility or liability for any refusal or omission to make all or any of the payments or for late payment or for any refusal or omission to follow such instructions. Further, Heartland Bank accepts no responsibility or liability for the accuracy of the information contained in the payment information fields on this Authority, or, for failure to transmit such information in the manner requested. In any event this Authority is subject to any arrangement now or hereafter existing between myself/ourselves and Heartland Bank in relation to my/our accounts.
2. Heartland Bank may in its absolute discretion conclusively determine the order of priority of payment by it of any moneys pursuant to this or any other authority which I/we may now or hereafter give to Heartland or draw on my/our accounts.
3. Heartland Bank may at any time terminate this Authority as to future payments by notice in writing to me/us or without notice, at any time after being advised in writing by the above payee that no further payment is required.
4. This Authority will remain in full force and effect in respect of all payments made in good faith notwithstanding my/our death or bankruptcy or any other revocation of this order until actual notice of my/our death, bankruptcy or such revocation is received by Heartland Bank.
5. All current Heartland Bank charges for this service in force from time to time are to be added to the payment amount and debited to my/our account.

Authorisation

Name

Name

Signature

Signature

Date / /

Date / /

Office use only

Accepted by

Checked by

Date loaded / /