



bt@agigroup.com.au
1300 375 018
agigroup.com.au

DIRECT DEBIT REQUEST

Please fill out this form using a black or blue pen.

By filling out this form, you will be deemed to have agreed to the terms and conditions appearing on page 2 of this form. This form and those terms and conditions will be deemed to be the Direct Debit Request Service Agreement between you and Australian Group Insurances Pty Limited (AGI) for the purposes of the Direct Debit System.

1. PLAN DETAILS

Policy number/s

Policy Owner

2. ACCOUNT DETAILS

Please fill in the following information about the account from which you wish direct debit payments to be drawn.

Name of Account

BSB

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

Account number

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

3. AUTHORISATION

I/We request and authorise Australian Group Insurances Pty Limited (AGI) ABN 97 140 572 434 (Direct Debit System User Identification Number Q40430), to instruct the Bank to debit my/our account (details of which appear above), with all amounts payable by me/us periodically under the policy/policies (described above) on around the first business day of the month the periodic payment is due through the Direct Debit System until further notice in writing from me/us.

I/We understand and acknowledge:

- the terms and conditions attached with this form, and agree that this Direct Debit Request and those terms and conditions will be deemed to be the Direct Debit Request Agreement between me/us and AGI for the purposes of the Direct Debit System;
- that AGI may, in its absolute discretion, by notice in writing to me/us:
 - (a) terminate this Direct Debit Request as to future debits; or
 - (b) vary the amount or frequency of future debits.

Authorised Signatory

Date

/	/
---	---

Please email the completed form to: bt@agigroup.com.au.

DIRECT DEBIT SERVICE AGREEMENT

Direct User's name: Australian Group Insurances Pty Limited ("we" or "us") ABN 97 140 572 434
Direct User's address: Level 3, 309 Pitt St Sydney NSW 2000

You have entered or about to enter into an arrangement under which you make payments to us. You want to make those payments by use of the Direct Debit System.

This agreement sets out the terms on which we accept and act under a Direct Debit Request ("your Direct Debit Request") that you give us to debit amounts from your account under the Direct Debit System. It is additional under which you make payments to us.

When we are bound by this agreement.

1. We agree to be bound by this agreement when we receive your Direct Debit Request complete with the particulars we need to draw an amount under it.

What we agree and what we can do.

2. We only draw funds from your account in accordance with the terms of your Direct Debit Request.
3. You may ask us to:
 - Alter the terms of your Direct Debit Request
 - Stop a drawing under your Direct Debit Request; or
 - Cancel your Direct Debit Request by:

Informing us of the change you require and the reason for the change. Please contact us by letter, phone, or email. Our contact details are:

Australian Group Insurances Pty Limited, Level 3, 309 Pitt St Sydney NSW 2000,

Phone: 1300 375 018, and

email bt@agigroup.com.au.

Stops and cancellations of your Direct Debit requests can be directed to us or your own Financial Institution.

4. You may dispute any amount we draw under your Direct Debit Request by:
Notifying us of your dispute by letter, phone, or email and provide us details of the payment you are disputing and reasons for the dispute. We will endeavour to resolve any dispute within 7 days. Disputes may also be directed to your own financial institution.
5. We will deal with any dispute under this agreement as follows:
We will investigate the dispute and if it is found that the amount has been debited in error we will refund you the disputed amount within 7 days. Where it is found that the disputed amount has been debited correctly and in accordance to the terms of the Direct Debit Agreement, we will notify you of that outcome in writing within 7 days.
6. If the day on which you must make any payment to us is not a business day, we draw on your account under your Direct Debit Request on the next business day.
7. If your financial institution rejects any of our attempts to draw an amount in accordance with your Direct Debit Request, we will contact you within 7 days to discuss a reattempt to draw funds from your account in accordance with your Direct Debit Request, or to arrange alternative methods of payment.
8. We will not disclose to any person any information you give us on your Direct Debit Request, which is not generally available, unless:
 - You dispute an amount we draw under your Direct Debit Request, where we will be required to disclose your information to your financial institution in order to investigate the dispute;
 - You consent to that disclosure; or
 - We are required to disclose that information by law.

What you should consider

9. Not all accounts held with a financial institution are available to draw on under the Direct Debit System.
10. Before you complete your Direct Debit Request, it is best to check account details against a recent statement from your financial institution to ensure the details on your Direct Debit Request are completed correctly.
11. It is your responsibility to ensure there are sufficient clear funds available in your account, by the due date to enable us to obtain payment in accordance with your Direct Debit Request.

Australian Group Insurances

ABN 97 140 572 434 | AFSL Number 379565
1300 375 018 | bt@agigroup.com.au | agigroup.com.au
Financial Services Guide | General Advice Warning | Privacy Policy

