

Direct Debit/Credit Card Authority Form



Mercury Energy
Mighty River Power Limited

YOUR MERCURY ENERGY ACCOUNT DETAILS

Name		Mercury Energy Account Number	
<input type="text"/>		<input type="text"/>	
Street address		Telephone number	
<input type="text"/>		<input type="text"/>	
Suburb	City	Daytime telephone number (if different)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Yes, I/we would like to pay by Direct Debit.
Complete section 1.

Yes, I/we would like to pay by credit card.
Complete section 2.

SECTION 1 - DIRECT DEBIT AUTHORITY Only complete this section if you want to pay by direct debit.

Details of the Bank Account you nominate to be debited Account holder's name <input type="text"/> Bank name <input type="text"/> Bank branch <input type="text"/> Account <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Branch address <input type="text"/> <input type="text"/>		AUTHORITY TO ACCEPT DIRECT DEBITS (Not to operate as an assignment or an agreement) AUTHORISATION CODE <table border="1" style="margin: auto;"> <tr> <td>1</td><td>2</td><td>0</td><td>0</td><td>4</td><td>8</td><td>7</td> </tr> </table> Date <input type="text"/> / <input type="text"/> / <input type="text"/>	1	2	0	0	4	8	7																										
1	2		0	0	4	8	7																												
Authorisation I / We authorise you, until further notice in writing, to debit my/our account with all amounts which MIGHTY RIVER POWER LIMITED, Private Bag 92008, Auckland 1, New Zealand (hereinafter referred to as the "Initiator"), the registered initiator of Authorisation Code 1200487, may initiate by Direct Debit. I / We acknowledge and accept that the Bank accepts this Authority only upon the conditions listed on the reverse of this form. The following information will appear in my/our bank statement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td colspan="4">Payer particulars</td> <td colspan="4">Payer code</td> <td colspan="4">Payer reference</td> </tr> <tr> <td>M</td><td>E</td><td>R</td><td>C</td><td>U</td><td>R</td><td>Y</td> <td>E</td><td>N</td><td>G</td><td>Y</td> <td>E</td><td>L</td><td>E</td><td>C</td><td>T</td><td>R</td><td>I</td><td>C</td><td>I</td><td>T</td><td>Y</td> </tr> </table> Signed <input type="text"/> Signed <input type="text"/> Authorised by holder(s) of the above nominated bank account.		Payer particulars				Payer code				Payer reference				M	E	R	C	U	R	Y	E	N	G	Y	E	L	E	C	T	R	I	C	I	T	Y
Payer particulars				Payer code				Payer reference																											
M	E	R	C	U	R	Y	E	N	G	Y	E	L	E	C	T	R	I	C	I	T	Y														

For Bank use only:

Approved 0048	Original - Retain at branch Date received:	Copy - forward to Initiator in post paid envelope Received by:	Checked by:	Bank Stamp
10 04	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 2 - CREDIT CARD AUTHORITY Only complete this section if you want to pay by credit card.

Credit card payment details Credit card Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Diners <input type="checkbox"/> American Express <input type="checkbox"/> Card number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Expiry date <input type="text"/> / <input type="text"/> Card holder's name <input type="text"/> Signature <input type="text"/>	
Authorisation I/We authorise you, until further notice in writing, to debit my/our nominated credit card account (hereinafter referred to as "Credit Card Account") with all amounts which the Initiator may debit the Credit Card Account. I/We acknowledge and accept that the Initiator accepts this Authority only upon the conditions on the reverse of this form.	

CONDITIONS OF THIS AUTHORITY TO ACCEPT DIRECT DEBITS

1. The Initiator:

- (a) Has agreed to give written advance notice to the Customer of the net amount of each Direct Debit and the due date of the debiting at least 10 calendar days (but not more than 2 calendar months) before the date when the Direct Debit will be initiated. The advance notice will include a schedule of the date(s) and amount(s) to be direct debited, together with the following message:

“The schedule below sets out the payment(s) that will be direct debited from your bank account on the due date(s) specified, UNLESS YOU INSTRUCT US OTHERWISE BY THE CANCELLATION DATE(S) also specified below.”

The cancellation date will be at least two days prior to the due date to allow for amendment of Direct Debits.

- (b) May, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under this Authority. Upon receipt of such notice, the Bank may terminate this Authority as to future payments by notice in writing to me/us.

2. The Customer may:

- (a) At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator.
- (b) Stop payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank.

3. The Customer acknowledges that:

- (a) This Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.
- (b) In any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
- (c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other disputes lie between me/us and the Initiator.
- (d) The Bank accepts no responsibility or liability for the accuracy of information about Direct Debits on Bank Statements.
- (e) The Bank is not responsible for, or under any liability in respect of:
- any variations between notices given by the Initiator and the amounts of Direct Debits.
 - the Initiator's failure to give written advance notice correctly nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation, the dispute lies between me/us and the Initiator.

4. The Bank may:

- (a) In its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this Authority or any other authority, cheque or draft properly executed by me/us and given to, or drawn on, the Bank.
- (b) At any time terminate this Authority as to future payments by notice in writing to me/us.
- (c) Change its current fees for this service in force from time-to-time.

CONDITIONS OF THIS AUTHORITY TO ACCEPT PAYMENTS BY CREDIT CARD

1. The Initiator has agreed to give written advance notice to the Customer of the net amount(s) to be debited to the Credit Card Account and the due date of the debit to the Credit Card Account at least 10 calendar days (but not more than 2 calendar months) before the date when the debit to the Credit Card Account will be initiated. The advance notice will include a schedule of the date(s) and amount(s) to be debited to the Credit Card Account, together with the following message:

“The schedule below sets out the payment(s) that will be debited to your nominated credit card account on the due date(s) specified, UNLESS YOU INSTRUCT US OTHERWISE BY THE CANCELLATION DATE(S) also specified below.”

The cancellation date will be at least two days prior to the due date to allow for amendment of amount(s) to be debited to the Credit Card Account.

2. The Customer may, at any time, terminate this Authority as to future payments by giving written notice of termination to the Initiator.

3. The Customer acknowledges that:

- (a) This Authority will remain in full force and effect in respect of all amounts to be debited to my/our Credit Card Account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Initiator.
- (b) In any event, this Authority is subject to any arrangement now or hereafter existing between me/us and the issuer of my/our nominated credit card in relation to my/our Credit Card Account.