

Direct Debit Request (DDR)

By using our Direct Debit facility, you can make regular monthly payments automatically to your Wizard Clear Advantage MasterCard from an account with any bank or financial institution in Australia. To authorise us to make such a Direct Debit, simply:

1. Specify the Direct Debit Payment Option you want and write in your Wizard Clear Advantage MasterCard account number.
2. Complete and sign the Direct Debit Request form, including the details of the account from which your payment will be made. (**Please Note:** Company bank accounts cannot be used for direct debit.)
3. Check that you've signed and dated the Direct Debit Request form before posting it to:
Wizard Clear Advantage MasterCard Customer Care GPO Box 1818 Melbourne VIC 3001 or fax to 1300 369 905.

Please keep paying your account as usual until advised on your Wizard Clear Advantage MasterCard statement that your Direct Debit facility has been activated.

If you have any queries about Direct Debit please call **1300 552 079**

Payment Option Schedule

My Wizard Clear Advantage MasterCard Account Number is

5	4	4	4																
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Full Closing Balance Payment as shown on my account statement

My choice of payment each month is: (tick one only)

Minimum Account Payable as shown on my monthly account statement.

Fixed Amount of \$.00 (must be \$10 or more) – or Minimum Account Payable as shown on my account statement (whichever is greater).

Direct Debit Request

Please insert the name and address of the Bank or Financial Institution at which your account is held.

Name of Bank or Financial Institution

Address of Bank or Financial Institution

Number	Street Name	Suburb/City	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Details of the Account to be Debited

Name of account to be debited (eg. Mr John Citizen)

BSB number

<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	---	----------------------	----------------------	----------------------	----------------------

Account 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"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Note: Direct Debit is not available on the full range of accounts. If in doubt please refer to your financial institution.

I/We request and authorise GE Capital Finance Australia ABN 42 008 583 588 ("GE Money"). User ID Number 95574 to debit the account described above with the amount of the payment due on my Wizard Clear Advantage MasterCard as specified in the Payment Option Schedule above.

Please insert your name

Title	Surname	Given Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address

Number	Street Name	Suburb/City	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Home Phone

Business Phone

Note: Signature of other account holder if joint account.

Signature	Date	Signature	Date
<input type="text" value="X"/>	<input type="text" value="/ /"/>	<input type="text" value="X"/>	<input type="text" value="/ /"/>

Please keep this information for your own records

Wizard Clear Advantage MasterCard,
GPO Box 1818, Melbourne, VIC 3001.
User ID Number 95574

The meaning of words printed like **this** in this Direct Debit Request Service Agreement is explained in 8 below.

1. Debiting your account

1.1 By signing a **direct debit request**, **you** have authorised **us** to arrange for funds to be debited from **your account**.

1.2 **We** will arrange for **your financial institution** to debit **your account** in accordance with **your** instructions given to **us** in the Payment Option Schedule. If, however, a **debit payment** is due on a day:

(a) which is not contained in a particular month; or

(b) which is not a **business day**,

then the **debit payment** will be made on the last day of that month or on the preceding **business day** respectively. If **you** are uncertain as to when a **debit payment** will be processed, **you** should contact your **financial institution** for assistance.

2. Changes by us

We may vary any details of this **agreement** or the **direct debit request** at any time (including cancelling it). **We** will give **you** notice in writing of any such change at least fourteen (14) days before the change takes effect.

3. Changes by you

You may request to stop or defer a **debit payment** or alter, suspend or cancel the **direct debit request** at any time. When **we** receive such a request, **we** will inform **you** of **our** notification requirements for such a request.

4. Your Obligations

4.1 It is **your** responsibility to ensure that there are sufficient clear funds available in **your account** to allow a **debit payment** to be made in accordance with the **direct debit request**.

4.2 If there are insufficient clear funds in **your account** to meet a **debit payment**:

(a) **you** may be charged a fee and/or interest by **your financial institution**;

(b) **you** may also incur fees or charges imposed or incurred by **us**; and

(c) **you** must arrange for the **debit payment** to be made by another method or arrange for sufficient clear funds to be in **your account** by an agreed time so that **we** can process the **debit payment**.

4.3 **You** should check **your account** statement to verify that the amounts debited from **your account** are correct.

4.4 If **we** are liable to pay goods and services tax ("GST") on a supply made by **us** in connection with this **agreement**, then **you** agree to pay **us** on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

5. Dispute

5.1 If **you** believe that there has been an error in debiting **your account**, **you** should notify **us** immediately by contacting **us** on 1300 552 079. Before you make the call, make sure **you** have all the relevant documentation available.

5.2 **We** will investigate and deal promptly and in good faith with any such query, claim or complaint. If **your** query, claim or complaint cannot be resolved to **your** satisfaction in that call, **we** will inform **you** at that time of the length of time which **we** estimate the investigation will take.

5.3 If **we** conclude as a result of **our** investigations that **your account** has been incorrectly debited **we** will adjust **your account** (including interest and charges) accordingly by directly crediting **your** account or sending **you** a refund cheque at **our** discretion. **We** will also notify **you** of the adjustment either orally or in writing.

5.4 If **we** conclude as a result of **our** investigations that **your account** has not been incorrectly debited **we** will respond to **your** query by providing **you** with reasons and any evidence for this finding.

5.5 Any queries **you** may have about an error made in debiting **your account** should be directed to **us** in the first instance so that **we** can attempt to resolve the matter between **us** and **you**. If **we** cannot resolve the matter **you** can still refer it to **your financial institution** which will obtain details from **you** of the disputed transaction and may lodge a claim on **your** behalf.

6. Accounts

6.1 **You** should check:

(a) with **your financial institution** whether direct debiting is available from **your account** as direct debiting is not available on all accounts offered by financial institutions;

(b) that **your account** details which **you** have provided to **us** are correct by checking them against a recent account statement; and

(c) with your **financial institution** if **you** are uncertain about either of the above matters **before** completing the **direct debit request**.

7. Confidentiality

7.1 **We** will keep any information (including **your account** details) in **your direct debit request** confidential. **We** will make reasonable efforts to keep any such information that **we** have about **you** secure and to ensure that any of **our** employees or agents who have access to information about **you** do not make any unauthorised use, modification, reproduction or disclosure of that information.

7.2 **We** will only disclose information that **we** have about **you**:

(a) to the extent specifically required or authorised by law; or

(b) for the purposes of this **agreement** (including disclosing information in connection with any query or claim); or

(c) with **your** implied or express consent.

8. Definitions

account means the account held at **your financial institution** from which **we** are authorised to arrange for funds to be debited.

agreement means this Direct Debit Request Service Agreement between **you** and **us**.

business day means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

debit payment means a particular transaction where a debit is made.

direct debit request means the Direct Debit Request between **us** and **you**.

us, we or **our** means GE Capital Finance Australia ABN 42 008 583 588, trading as GE Money.

you means the person(s) who signed the **direct debit request**.

your financial institution means the financial institution where **you** hold the **account** that **you** have authorised **us** to debit.