

Direct Debit Cancellation Request



Has the Customer given a signed cancellation instruction? ☐ Yes ☐ No
If yes, is the signed cancellation instruction attached or included? ☐ Yes ☐ No

Note: any Cancellation Request issued on behalf of a new customer under an account switching arrangement must be signed by the customer in accordance with the relevant account authority.

Date sent (DD/MM/YYYY)

Ledger Institution's Reference Number

Confidential Communication:

This facsimile is confidential and intended only for the use of the addressee. If you have received this communication in error, please notify the financial institution from which you have received it, at the telephone number given, to arrange disposal. Unauthorised use of the information in this message may result in legal proceedings against the user.

To:

Name of Sponsor Institution

Name of Sponsor Institution's Contact*

Fax Number

Email Address

* Refer to Appendix B7 of the BECS Procedures for details of Contact and fax number / e-mail address.

CC:

Full name and ACN/ARBN/ABN of old Ledger FI

Name of old Ledger FI Contact*

Fax Number

Email Address

* Refer to Appendix B7 of the BECS Procedures for details of Contact and fax number / e-mail address.

From:

Full name and ACN/ARBN/ABN of Ledger FI

Name of Branch or Central Point

Fax Number

Email Address

Name of contact officer (Full name)

Contact Officer Signature

We advise that our Customer(s), whose details are shown below, has/have given instructions that they wish to cancel a Direct Debit Request addressed by them to the Debit User whose name and User ID Number are also shown below.

Customer to complete:

Customer Name(s)

Details of account debited

BSB Number

Account Number

Name of Debit User

Debit User ID Number

Lodgement Reference Number

Name of Remitter

Customer's identification number(s) with the Debit User (if known)

(Examples: Customer's Billing Number, Contract Number or Policy)

Date the Customer's account was last debited

In accordance with clause 7.5 of the BECS Procedures, please PROMPTLY forward a copy of this Cancellation Request to the Debit User, who is to act promptly under clause 7.10 of the BECS Procedures in accordance with an instruction to cancel a Direct Debit Request.

I/we confirm that I am/we are authorised to operate the account represented by the BSB and Account number detailed above.

I/we authorise [Ledger FI/Incoming FI] to submit this Cancellation Notice on my/our behalf.

Customer Name(s)

Customer Name(s)

Customer Signature(s)

Customer Signature(s)