Direct Debit Cancellation Request

o: _____ [Name of Sponsor Institution]

_____Name of Sponsor Institution's Contact*

Fax number: _____e-mail: _____

* 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: _____e-mail: _____

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

From: Arab Bank Australia Limited_____ [Full name and ACN/ARBN/ABN of old Ledger FI]]

Treasury & Retail Support_____Name of Branch or Central Point

Fax number: 02 9221 5428_____e-mail: BECS@arabbank.com.au_____

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 Name(s):   _____

Details of account debited: _____
                               BSB Number:
                               Account Number:

Name of Debit User: _____

Debit User ID Number: _____

Lodgement Reference: _____

Name of Remitter: _____

Customer's identification number(s) with the Debit User (if known):
[Examples: Customer's Billing Number, Contract Number or Policy]: Number] 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 Arab Bank Australia Limited to submit this Cancellation Notice on my/our behalf.

Customer Signature: _____

Customer Name: _____

Date: _____

Bank Use Only:

Has the customer given a signed cancellation instruction? Yes ☐ No☐

If yes, is the signed cancellation instruction attached? Yes ☐ No☐

Date Sent: _____

Ledger Institution's Reference Number: _____

End of Form