

Print clearly in capital letters using **black or blue ink** if completing this form manually. Place a cross **X** within the appropriate box when selecting an option. If insufficient space, please attach additional pages. Do not sign this application form unless all necessary sections have been fully and accurately completed.

Loan Account Name \_\_\_\_\_

Loan Account Number \_\_\_\_\_

### CONTACT DETAILS OF BORROWER

Name \_\_\_\_\_

Contact number \_\_\_\_\_

Email address \_\_\_\_\_

Postal address \_\_\_\_\_ Postcode \_\_\_\_\_

### CONTACT DETAILS OF BANK ACCOUNT HOLDER

Name \_\_\_\_\_

Contact number \_\_\_\_\_

Email address \_\_\_\_\_

Postal address \_\_\_\_\_ Postcode \_\_\_\_\_

### DIRECT DEBIT DETAILS

I/We hereby authorise and request La Trobe Financial to debit my/our loan contract repayment through the Bulk Electronic Clearing System (**BECS**) from the bank account nominated below pursuant to my/our agreement with La Trobe Financial subject to La Trobe Financial always being entitled from time to time to add to this amount any other charges due by me/us under the agreement. I/we authorise La Trobe Financial to increase the amount debited to an amount sufficient to cover the Total Monthly Loan Repayment should my/our loan contract repayment increase at any time.

#### Nominated financial account details

Account Name \_\_\_\_\_

BSB \_\_\_\_\_ Account Number \_\_\_\_\_

Bank/Branch \_\_\_\_\_

#### Payment details

Replace existing details       In addition to existing details

Minimum monthly payment;

**OR**

Nominated payment amount: \$ \_\_\_\_\_

Weekly       Fortnightly       Monthly       Once only

Date commencing from \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

If you are providing your bank account details **and you are not the borrower**, you must provide a copy of photographic identification (ie. drivers licence or passport) with this form.

**DIRECT DEBIT DETAILS****Direct Debit Request Service Agreement**

This authority covers La Trobe Financial Services Pty Limited (**La Trobe Financial**), ABN 30 006 479 527 (APCA User ID Number 064914, 404238, 404239) and Perpetual Corporate Trust Limited ACN 000 341 533 as loan originator/manager under an arrangement with Perpetual Corporate Trust Limited.

It explains what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider. Please keep this agreement for future reference. It forms part of the terms and conditions of your Direct Debit Request (**DDR**) and should be read in conjunction with your DDR authorisation.

I/we acknowledge that:

1. La Trobe Financial may in its absolute discretion determine the order of priority of the payment of monies pursuant to this request or any other mandate or authority;
2. La Trobe Financial may in its absolute discretion at any time by notice in writing to me/us terminate this request as to future debits;
3. I/We may, by prior arrangement and or/advice to La Trobe Financial, vary the amount of the frequency of future debits. La Trobe Financial will advise me/us 14 days in advance of any changes to the Direct Debit Request;
4. A Direct Debit through BECS is not available on all bank accounts and I/we have confirmed with my/our financial institution that the bank details provided above are correct and appropriate for this direct debit request. It is my/our responsibility to ensure sufficient cleared funds are in the bank account nominated when payments are to be drawn. If I/we are uncertain as to when the debit will be processed to my/our account, I/we are responsible to enquire direct with my/our financial institution. Where returned unpaid transactions occur, La Trobe Financial will treat the payment as if it was never made, a fee may be applied for drawings that are returned unpaid and La Trobe Financial reserves the right to cancel this Direct Debit Request. My/our financial institution may charge a dishonour fee if there are insufficient funds available to process the direct debit. Where a payment is due on a day which is not a business day, La Trobe Financial may process the payment on the next business day;
5. I/we understand the above authority represents my/our authority and instruction to my/our financial institution;
6. For matters relating to the Direct Debit Request, including cancellation, alteration, deferment or suspension of a drawing arrangement, investigation of or dispute in relation to a payment, you should contact La Trobe Financial on 13 80 10;
7. If La Trobe Financial's investigations show that your account has been incorrectly debited, La Trobe Financial will arrange for your account to be adjusted accordingly. La Trobe Financial will also notify you of the amount by which your account has been adjusted. If, following our investigations, La Trobe Financial believes on reasonable grounds your account has been correctly debited, La Trobe Financial will respond to your query by providing you with reasons and copies of any evidence (where applicable) for this finding. If La Trobe Financial cannot resolve the matter, you can refer the matter to your Financial Institution, which will obtain details from you of the disputed payment and may lodge a claim on your behalf. If you have a complaint about this service please put your complaint in writing and forward to the Customer Resolution Team at La Trobe Financial, GPO BOX 2289, Melbourne, Victoria, 3001 or [customerresolution@latrobefinancial.com.au](mailto:customerresolution@latrobefinancial.com.au);
8. All customer records and bank account details will be kept private and confidential, to be disclosed only at your request or at the request of the Financial Institution in connection with a claim made to correct/investigate an alleged incorrect or wrongful debit or otherwise as required by law; and
9. All borrowers must sign this authority to debit the nominated bank account. Any future requests to change the nominated bank account must be signed by all borrowers as disclosed on the loan contract. Company loans must be signed by a minimum of two (2) company directors or a director and company secretary, unless the company has a sole director.

**SIGNATURES**

Signature _____	Signature _____
Full name _____	Full name _____
Date _____	Date _____
Signature _____	Signature _____
Full name _____	Full name _____
Date _____	Date _____

RETURN COMPLETED, SIGNED FORM TO:

Mail: **La Trobe Financial**  
**GPO Box 2289**  
**Melbourne Victoria 3001 Australia**

Email: **[customerservices@latrobefinancial.com.au](mailto:customerservices@latrobefinancial.com.au)**