MAS KiwiSaver Scheme
Direct Debit Authority Form

Please forward completed documents to:
mas@invest.mas.co.nz

Or post to:
MAS Superannuation
FREEPOST 884
PO Box 91976
Victoria Street West, Auckland 1142

For assistance:
Phone 0800 627 738
Email mas@invest.mas.co.nz

1. Bank instructions

Account name

Customer to complete bank, branch, account number and suffix of account to be debited.

Account number

Bank

Branch

Town/city

MAS Member number

Authority

Authority to accept direct debits *(Not to operate as an assignment or an agreement)*

Authorisation code *(User number)*

0	6	0	9	9	3	3

Date dd-mm-yyyy

2. Payment instructions

I wish to invest $ Per* dd-mm-yyyy

*Choose from weekly, fortnightly, monthly, quarterly, 6-monthly or annually. For monthly, quarterly, 6-monthly or annual periods, to ensure you receive your full government contribution, if eligible, please choose a start date on or before the 27th of the month.

Start date dd-mm-yyyy (allow at least five working days)

I/we authorise you until further notice in writing to debit my/our account with you all amounts which Medical Assurance Society New Zealand Limited (hereinafter referred to as the Initiator), Head Office, Level 3, PwC Center, 10 Waterloo Quay, Pipitea, Wellington 6011, PO Box 957, Wellington 6140, Telephone 0800 800 627, the registered initiator of the above authorisation code, may initiate by Direct Debit.

I/we acknowledge and accept that the Bank accepts this authority only upon the conditions listed overleaf.

Information to appear in my/our bank statement (to be completed by the Member)

Payer reference

Authorised Signature Date dd-mm-yyyy

Authorised Signature Date dd-mm-yyyy

For bank use only

Approved	Date received	Recorded by	Checked by	Bank stamp
00993 01 91				

Original - retain at branch. Duplicate – forward to initiator if requested.

3. Conditions of this authority to accept Direct Debits

1. The Initiator:
   (a) Undertakes to give written notice to the Acceptor of the commencement date, frequency and amount at least 10 calendar days before the first Direct Debit is drawn (but not more than two calendar months). This notice will be provided either:
      ii) in writing; or
      iii) by electronic mail where the Investor has provided prior written consent to the Initiator. Where the Direct Debit system is used for the collection of payments which are regular as to frequency, but variable as to amounts, the Initiator undertakes to provide the Acceptor with a schedule detailing each payment amount and each payment date.
      iii) In the event of any subsequent change to the frequency or amount of the Direct Debits, the Initiator has agreed to give advance notice at least 30 days before changes come into effect. This notice must be provided either:
         - in writing; or
         - by electronic mail where the Investor has provided prior consent to the Initiator.
   (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 the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.
   (c) May, upon receiving an 'Authority Transfer Form' (dated after the day of this authority) signed by me/us and addressed to a bank to which I/we have transferred my/our bank account, initiate Direct Debits in reliance of that Transfer Form and this Authority for the account identified in the Authority Transfer Form.
2. The Investor 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.
   (c) Where a variation in the amount agreed between the Initiator and the Investor from time to time be direct debited has been made without notice being given in terms of clause 1 a) above, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of the Direct Debit back to the Initiator through the Initiator's Bank, provided such request is not made more than 120 days from the date when the Direct Debit was debited to my/our account.
3. The Investor 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 dispute lies between me/us and the Initiator.
   (d) Where the Bank has used reasonable care and skill in acting in accordance with this Authority, the Bank accepts no responsibility or liability in respect of:
      - accuracy of information about Direct Debits on Bank Statements.
      - any variations between notices given by the Initiator and the amounts of Direct Debits.
   (e) The Bank is not responsible for, or under any liability in respect of 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.
   (f) Notice given by the Initiator in terms of clause 1 a) to the debtor responsible for the payment shall be effective. Any communication necessary because the debtor responsible for payment is a person other than me/us is a matter between me/us and the debtor concerned.
4. The Bank may:
   (a) In its absolute discretion conclusively determine the order of priority payment by it of any monies pursuant to this 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) Charge its current fees for this service in force from time to time.
   (d) Upon receipt of an 'Authority to Transfer Form' signed by me/us from a bank to which my/our account has been transferred, transfer to that bank this authority to accept Direct Debits.