



Centrepay Direct Debit Request

Kurri Kurri Community Services
251 Lang Street
KURRI KURRI NSW 2327
Tel: 4937 4555
Email: directdebit@kkcc.com.au

Request and Authority to debit the Centrelink account named below to pay account repayments to Kurri Kurri Community Services Ltd ('KKCS')

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| Request and Authority to debit | <p>Your Surname _____</p> <p>Your Given names _____</p> <p>Date of Birth _____</p> <p>Phone Number _____</p> <p>request and authorise KKCS to arrange, through Centrepay, a debit from your Centrelink welfare payments for regular repayments for services provided .</p> <p>This debit will be subject to the terms and conditions of the Centrepay Direct Debit Service Agreement (DDSA).</p> |
| Repayment Instalment Details | <p>Type of Payment for Deduction- Age Pension / Newstart Allowance / Parental Leave Pay</p> <p>Fortnight Repayment Amount _____</p> <p>Payment start Date _____</p> <p>Your Centrelink Reference Number _____</p> <p><u>Please note the minimum amount for deductions is \$10.00</u></p> |
| Acknowledgment | <p>By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and KKCS as set out in this Request and in your Direct Debit Service Agreement.</p> |
| Insert your signature and address | <p>Signature _____</p> <p>Address _____</p> <p>Date Signed _____</p> |
| Second account signatory (only complete this section if two signatories are required to operate on the account nominated above) | <p>Name of Co-Signatory _____</p> <p>Signature _____</p> <p>Address _____</p> <p>Date Signed _____</p> |
| Office Use Only | <p>Business Unit _____ Job Number _____.</p> <p>Notification Date: _____ Exo Account Number: _____</p> |