

# Direct Debit Request (DDR) Trade Waste



## ABOUT THIS FORM

Request and Authority to debit the account named below to pay

**Randwick City Council    APCA ID 402980    ABN 77 362 844 121**

## REQUEST AND AUTHORITY TO DEBIT

Your Surname or Company Name .....

Your Given names or ABN ..... "you"

request and authorise Randwick City Council (APCA ID 402980) to arrange, through its own financial institution, a debit to your nominated account any amount Randwick City Council as deemed payable by you.

## TRADE WASTE

Account Name ..... Account No: .....

Service Address .....

Email Address .....

Mobile No .....

This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

## INSERT THE NAME AND ADDRESS OF FINANCIAL INSTITUTION AT WHICH YOUR ACCOUNT IS HELD

Financial institution name .....

Address .....

## INSERT BANK OR CREDIT UNION DETAILS OF ACCOUNT TO BE DEBITED

Names/s on account .....

BSB number (Must be 6 digits)    .....    .....    .....    .....    .....

Bank Account number .....

## GET IN CONTACT

Randwick City Council  
30 Frances Street  
Randwick NSW 2031  
ABN: 77 362 844 121

Phone 1300 722 542  
[council@randwick.nsw.gov.au](mailto:council@randwick.nsw.gov.au)  
[www.randwick.nsw.gov.au](http://www.randwick.nsw.gov.au)

## INSERT YOUR SIGNATURE AND ADDRESS

Signature ..... Date .....

Name ..... Position .....

*(if signing for a company, sign and print full name and capacity for signing eg. Director)*

Postal Address .....

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## SECOND ACCOUNT SIGNATORY AND ADDRESS (IF REQUIRED)

Signature ..... Date .....

Name ..... Position .....

*(if signing for a company, sign and print full name and capacity for signing eg. Director)*

Postal Address .....

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## DECLARATION

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 debit arrangements between you and Randwick City Council as set out in this Request and in your Direct Debit Request Service Agreement.

- If your application is incomplete, it will not be accepted and will be returned to you.
- **I have read and agree to the Direct Debit Request Service Agreement.**

Signature: .....

Name: ..... Date: .....

## PRIVACY NOTIFICATION

The purpose of collection of this information is for processing your application. Provision of this information is voluntary and is required to help process your application. You are entitled to have access to this form to correct or amend it after you have given it to Council. This form will be stored electronically in Council's electronic document management system. Access to this information is restricted to Council. Members of the public will not be provided with access to the personal details contained on this form.

## DIRECT DEBIT REQUEST SERVICE AGREEMENT

This is your Direct Debit Service Agreement with Randwick City Council, APCA ID 402980 & ABN 77 362 844 121. 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.

## DEFINITIONS

**account** means the account held at *your financial institution* from which we are authorised to arrange for funds to be debited.

**agreement** means this Direct Debit Request Service Agreement between *you* and *us*.

**banking day** means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

**debit day** means the day that payment by *you* to *us* is due.

**debit payment** means a particular transaction where a debit is made.

**direct debit request** means the Direct Debit Request between *us* and *you*.

**us** or **we** means Randwick City Council, (the Debit User) *you* have authorised by requesting a *Direct Debit Request*.

**you** means the customer who has signed or authorised by other means the *Direct Debit Request*.

**your financial institution** means the financial institution nominated by *you* on the DDR at which the *account* is maintained.

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### 1. DEBITING YOUR ACCOUNT

- 1.1 By signing a *Direct Debit Request* or by providing *us* with a valid instruction, *you* have authorised *us* to arrange for funds to be debited from *your account*. You should refer to the *Direct Debit Request* and this *agreement* for the terms of the arrangement between *us* and *you*.
- 1.2 We will only arrange for funds to be debited from *your account* as authorised in the *Direct Debit Request*.  
**or**  
We will only arrange for funds to be debited from *your account* if we have sent to the address nominated by *you* in the *Direct Debit Request*, a billing advice which specifies the amount payable by *you* to *us* and when it is due. The due date will be 14 days after your quarterly trade waste invoice is raised and will be for the full cost of each quarter.
- 1.3 If the *debit day* falls on a Friday, Saturday, Sunday or public holiday, we may direct *your financial institution* to debit *your account* on the following day. If you are unsure about which day *your account* has or will be debited you should ask *your financial institution*.

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### 2. AMENDMENTS BY US

- 2.1 We may vary any details of this *agreement* or a *Direct Debit Request* at any time by giving *you* at least fourteen (14) days written notice.

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### 3. AMENDMENTS BY YOU

- 3.1 You may change\*, stop or defer a debit payment, or terminate (cancel) this agreement at any time by providing *us* with at least 10 business days notification to:  
Randwick City Council – email: [council@randwick.nsw.gov.au](mailto:council@randwick.nsw.gov.au) OR post to 30 Frances Street, Randwick 2031  
**or**  
by telephoning *us* on 1300 722 542 during business hours;  
**or**  
arranging it through your own financial institution, which is required to act promptly on your instructions.  
  
\*Note: in relation to the above reference to 'change', your financial institution may change your direct debit payment only to the extent of advising *us* Randwick City Council of your new account details.

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### 4. YOUR OBLIGATIONS

- 4.1 It is *your* responsibility to ensure that there are sufficient clear funds available in *your account* to allow a *debit payment* to be made in accordance with the *Direct Debit Request*.
- 4.2 If there are insufficient clear funds in *your account* to meet a *debit payment*:
  - a) *you* may be charged a fee and/or interest by *your financial institution*;
  - b) *you* may also incur fees or charges imposed or incurred by *us*; and
  - c) *you* must arrange for the *debit payment* to be made by another method or arrange for sufficient clear funds to be in *your account* by an agreed time so that *we* can process the *debit payment*.
- 4.3 *You* should check *your account* statement to verify that the amounts debited from *your account* are correct.
- 4.4 It is *your* responsibility to advise *us* if your nominated account is transferred or closed, or the account details change.
- 4.5 If you have chosen to pay by Direct Debit, ensure that all account holders on the nominated financial institution account (in the case of joint account); sign the direct debit authorisation form.

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## 5. DISPUTES

- 5.1 If you believe there has been an error in debiting *your account*, you should notify us directly by calling 1300 722 542 and confirm that notice in writing with us as soon as possible so that we can resolve your query quickly. Alternatively you can take it up directly with your financial institution.
- 5.2 If we conclude as a result of our investigations that *your account* has been incorrectly debited we will respond to *your query* by arranging for *your financial institution* to adjust *your account* (including interest and charges) accordingly. We will also notify you in writing of the amount by which *your account* has been adjusted.
- 5.3 If we conclude as a result of our investigations that *your account* has not been incorrectly debited we will respond to *your query* by providing you with reasons and any evidence for this finding in writing.

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## 6. ACCOUNTS

You should check:

- a) with your *financial institution* whether direct debiting is available from *your account* as direct debiting is not available through BECS on all accounts offered by financial institutions.
- b) *your account* details which you have provided to us are correct by checking them against a recent *account* statement; and
- c) with your *financial institution* before completing the *Direct Debit Request* if you have any queries about how to complete the *Direct Debit Request*.

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## 7. CONFIDENTIALITY

- 7.1 We will keep any information (including *your account* details) in your *Direct Debit Request* confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.
- 7.2 We will only disclose information that we have about you:
- a) to the extent specifically required by law; or
  - b) for the purposes of this *agreement* (including disclosing information in connection with any query or claim).

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## 8. NOTICE

- 8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to:
- Randwick City Council – email: [council@randwick.nsw.gov.au](mailto:council@randwick.nsw.gov.au) OR post to 30 Frances Street, Randwick 2031
- 8.2 We may send notices either electronically to your email address or by ordinary post to the address you have given us.
- 8.3 If sent by mail, communications are taken to be received on the day they would be received in the ordinary course of post.

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## HOW TO LODGE THIS APPLICATION

EMAIL: [council@randwick.nsw.gov.au](mailto:council@randwick.nsw.gov.au) OR

BY MAIL OR

OVER THE COUNTER at our Customer Service Centre 30 Frances Street Randwick – Open 8:30am – 5:00pm, Mon-Fri

Address the Application to: Randwick City Council

Post: 30 Frances Street, Randwick 2031