DEBIT ORDER AUTHORITY

Please complete the following to enable **Smit and Kie Pty(Ltd)**. to debit your bank account for the collection of your monthly premiums.

1. **THE NAME OF YOUR BANK**

    NAME   : _____

    BRANCH   : _____

2. **BRANCH CODE OF BANK** SEE TOP RIGHT HAND CORNER OF CHEQUE

3. **ACCOUNT NUMBER**

4. **TYPE OF ACCOUNT**
    (Please tick appropriate box)

SAVINGS	YES
CHEQUE	YES
TRANSMISSION ACCOUNT	YES
	YES

    OTHER (specify): _____

5. **PAYERS ACCOUNT NAME**

    _____

FULL NAME_____**SIGNATURE**_____

DATE_____**SIGNED AT**_____