



# DIRECT DEBIT REQUEST

Request for debiting amounts for payments to Prime Telecom

Please note: Customers can complete the following form online via <http://www.primetelecom.com.au/direct-debit-form.html>

Customer Care: 1300 884 901

Po Box 856 North Sydney NSW 2059 Prime Telecommunications Pty Ltd. ABN 44 161 488 491

## APPLICANT DETAILS

Date:	Customer/Company Name:	Customer No. (if applicable):																		
Site Address:		Suburb:	State:		Postcode:															
Customer Contact:																				
Phone:										Mobile:										
Fax:										Email:										

## PAYMENT METHOD

Direct Debit from Bank Account  
(Complete Schedule 1)

OR

Direct Debit from Credit Card  
(Complete Schedule 2)

### Direct Debit Request and Authority To Debit the account named below to pay Prime Telecommunications Pty Ltd

Company Name, Trading Name or Surname: ABN or Given names:

request and authorise Prime Telecommunications Pty Ltd ABN 44 161 488 491 ("Prime Telecom") to arrange for any amount Prime Telecom may debit or charge as specified below and subject to the terms and conditions of this Direct Debit Request. This Direct Debit Request allows for Prime Telecom to debit the nominated account until further notice in writing through the Bulk Electronic Clearing System held at the financial institution identified below, subject to the terms and conditions of the Direct Debit Request Service Agreement a copy of which I have received read and understood, and any further instructions provided below. Debits may be made fourteen days after the issue of a billing advice.

### Schedule 1:

Financial Institution:


Branch:

Account:BSB:																				
Account Number																				

Name Of

**ACKNOWLEDGEMENT:** By signing this Direct Debit Request I/We acknowledge having read and understood the terms and conditions governing the debit arrangements between Prime Telecom and me/us as set out in this Request and in your Direct Debit Request Service Agreement. I/We authorise and request that this Direct Debit Request remain in force until cancelled, deferred or otherwise altered in accordance with the Service Agreement. I/We confirm account details are correct and that this request is signed by required number of authorised signatories.

Signature of Applicant One:

Date:

Signature of Applicant Two: (if applicable):

Date:

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*Schedule 2:*

**CREDIT CARD DETAILS:** By providing this information you are authorising Prime Telecom to process payments using the following credit card details for your monthly charges for the Services.

Cardholders Name:

Cardholders Signature

Credit Card Number:

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Card Type:

Expiration Date:

·VISA, MasterCard, AMEX and Diners Club cards accepted. A surcharge of 3.75% (plus applicable GST) applies to payments made with AMEX and Diners Club cards. A surcharge of 2% (plus applicable GST) applies to payments made with Visa and MasterCard.

**PLEASE NOTE:**

A copy of the Direct Debit Request Service Agreement can be found at <http://www.primetelecom.com.au/direct-debit-form.html>

Please return this form by either;  
Fax number: 02 9460 4179 or Mail: Po Box 856 North Sydney NSW 2059