

EFT REGISTRATION FORM (Owner's Details)

This form is to be completed by an Owner authorising the User to pay for entries from Nominated Accounts.

A DDR form must be completed in respect of each Nominated Account in this Schedule E authorising the Ledger Financial Institution to debit those accounts on receipt of instructions from the ACS through the Direct Debit System.

Please print all details clearly in the spaces provided.

1. **Name of User:**
- User (Site) ID:** **User (Agency) ID:**
2. **Owner's Name:**
- Owner Code :**
3. List each Nominated Account up to a maximum of nine in respect of which a DDR form has been completed.

No.	BSB Number	Account Number	Account Name	\$ Daily Limit
1				
2				
3				
4				
5				
6				
7				
8				
9				

4. The \$ daily limit (if any) that can be drawn from the Nominated Accounts applies to payments made from the User Site ID specified at 1 above.
5. This form must be signed by an Owner.
6. The Owner warrants that all details provided are true in every particular and undertakes to, or have an Account Holder, immediately notify the ACS in writing of any changes in the details.

I, (Please Print Full Name) hereby authorise the above mentioned User to make payment to the ACS using the EFT facility from the above mentioned accounts subject to the above mentioned conditions.

A written authorisation in accordance with sub-clause 11.4 (if applicable) is attached.

Signature: / 20 Ph: ()