



Air New Zealand Direct Debit Authority Agreement

By completing this form you are giving Air New Zealand authority to deduct the full outstanding amount from your month end statement on the 20th of the month following.

| | |
|---------------------------|--|
| Authorisation Code | Authority to accept direct debits (not to operate as an assignment or agreement) |
| 0 2 0 6 7 5 5 | |

Your Travelcard Account Details

| | |
|---------------------------|----------------------|
| Travelcard Account Number | <input type="text"/> |
| Travelcard Account Name | <input type="text"/> |
| Address | <input type="text"/> |

Your Bank Account Details

| | | | | | | | | | | | | |
|---|----------------------|----------------------|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--|
| Name of Bank Account | <input type="text"/> | | | | | | | | | | | |
| Bank Account from which payment is to be deducted | Bank | Branch | Account Number | | | | Suffix | | | | | |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |

**Please attach a deposit slip to ensure your number is loaded correctly.

| | | | |
|-------------------------------------|--------------------------|----------------------|------------------------|
| Details to appear on your statement | Payer Particulars | Payer Code | Payer Reference |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|-------------------------|----------------------|
| Authorised Signature(s) | <input type="text"/> |
| Date | <input type="text"/> |

To The Bank Manager

| | |
|----------------|----------------------|
| Bank | <input type="text"/> |
| Branch Address | <input type="text"/> |
| Town/City | <input type="text"/> |

I/We authorise you until further notice, to debit my/our account with all amounts which the registered Initiator of

the authorisation code, may initiate by direct debit.

I/We acknowledge that the Bank accepts this Authority upon conditions listed below

Conditions of this Authority

1. The Initiator:

a) Has agreed to give written advance notice of the net amount of each Direct Debit and the due date of debiting at least 10 calendar days before (but not more than 2 calendar months) the date the Direct Debit debt will be initiated. The advance notice will include the following message:

"In accordance with our direct debit authority we will be deducting your current statement balance from your designated bank account on the 20th of the month following."

**For any transactions under dispute Air New Zealand Travelcard Admin need to be notified at least two days prior to the due date to allow for amendment of direct debits by emailing Travelcardadmin@airnz.co.nz

b) May, upon the relationship which gave rise to the Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under this Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payment by notice in writing to me/us.

2. The Customer may:

a) At any time, terminate this Authority as to future payments by giving written notice of termination to the Bank and to the Initiator.

b) Stop payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid.

3. The Customer acknowledges that:

a) This Authority will remain in force and effect in respect of all Direct Debits made from my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.

b) In any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.

c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other dispute lies between me/us and the Initiator.

d) Where the Bank has not used reasonable care and skill in acting in accordance with this Authority, the Bank accepts no responsibility or liability in respect of:

- The accuracy of information about Direct Debits on Bank statements

- Any variations between notices given by the Initiator and the amounts of Direct Debit

e) The Bank is not responsible for, or under any liability in respect of the Initiators failure to give written advance notice correctly for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.

4. The Bank may:

a) In its absolute discretion conclusively determine the order of proximity of payment by it of any monies pursuant to this or any other Authority, cheque or draft properly executed by me/us and given to or drawn on by the Bank.

b) At any time terminate this Authority as to future payments by notice in writing to me/us.

c) Change its current fees for this service in force from time-to-time.