



#### PLEASE FILL IN THE FORM USING A BALL POINT PEN:

allpay Limited Re:
Oak Tree Housing Association
Fortis et Fides
Whitestone Business Park,
Whitestone,
Hereford. HR1 3SE

Name(s) of Account Holders(s).						
Bank/Building Society Account Number.						
Bank Sort Code.						

# Name & full postal Address of your Bank or Building Society.

To: The Manager	Bank/Building Society
Address	
Postcode	

# Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number

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Please complete your Address and T This is not part of the instruction Society. For allpay Limited official use on	to your Bank or Building
Address	
	Postcode
Telephone	Ref:

## Instruction to your Bank or Building Society.

Please pay allpay Limited Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with allpay Limited and, if so, details will be passed electronically to my Bank or Building Society.

Signatures	
Date	

#### Reference



Banks and Building Societies may not accept Direct Debit Instructions on some types of Account

This Guarantee should be detached and retained by the Payer

# DIRECT

### The Direct Debit Guarantee

- ° This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- ° If there are any changes to the amount, date or frequency of your Direct Debit, allpay Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request allpay Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- ° If an error is made in the payment of your Direct Debit by allpay Limited or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
  - If you receive a refund you are not entitled to, you must pay it back when allpay Limited asks you to.
- ° You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may be required. Please also notify us.

## **Direct Debit Payment Details**

Reference Number					
1st Payment Amount	Date of 1st	Payment			
Subsequent Payments	Next Due D	ate			
Frequency of Payment					
Area Office (if applicable)					
Date of entry onto W ebconnect					
Please enter the details of the customer, if different from those of the bill payer overleaf:					
Name					
Address					
Postcode					

### PLEASE RETURN TO:

Payments will be collected on behalf of:

OAK TREE HOUSING ASSOCIATION
41 HIGH STREET
GREENOCK

**PA15 1NR**