



<p>Ophir Health Services Pty Ltd ATF Ophir Trust T/A Twin Waters Pharmacy ABN: 93914663879 Shop 6 175 Ocean Drive Twin Waters Qld 4564 Phone: 07 5457 0009 Email: shop@twinwaterspharmacy.com.au</p>	<h2>DIRECT DEBIT REQUEST</h2>
<p>Request and Authority to debit the account named below to pay OPHIR HEALTH SERVICES PTY LTD ATF OPHIR TRUST</p>	
<p>Request and Authority to Debit</p>	<p>Last Name or Company Name: _____</p> <p>Given Names or ABN/ARBN: _____ “(you)”</p> <p>request and authorise OPHIR HEALTH SERVICES PTY LTD ATF OPHIR TRUST User id 6206742020 to arrange, through its own financial institution, a debit to your nominated account any amount OPHIR HEALTH SERVICES PTY LTD ATF OPHIR TRUST has deemed payable by <i>you</i>.</p> <p>This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from <i>your</i> account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.</p>
<p>Insert the name and address of financial institution at which account is held</p>	<p>Financial Institution name: _____</p> <p>Address: _____</p> <p>Suburb: _____ State: _____ Postcode: _____</p>
<p>Insert details of account to be debited</p>	<p>Account name: _____</p> <p>BSB: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Account Number: <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"/></p>
<p>Acknowledgment</p>	<p>By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and OPHIR HEALTH SERVICES PTY LTD ATF OPHIR TRUST as set out in this Request and in your Direct Debit Request Service Agreement.</p>
<p>Insert your signature</p>	<p>Signature _____ <small>(If signing for a company, sign and print full name and capacity for signing eg. director)</small></p> <p>_____</p> <p>Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
<p>Second account signatory (if required)</p>	<p>Signature _____ <small>(If signing for a company, sign and print full name and capacity for signing eg. director)</small></p> <p>_____</p> <p>Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>



Direct Debit Service Agreement

The following is your Direct Debit Service Agreement Ophir Health Services Pty Ltd ATF Ophir Trust T/A Twin Waters Pharmacy ABN: 93914663879 The agreement is designed to explain what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit Provider.

We recommend you keep this agreement in a safe place for future reference. It forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your DDR form.

Definitions

- account means the account held at your financial institution from which we are authorised to arrange for funds to be debited.
- agreement means this Direct Debit Request Service Agreement between you and us.
- banking day means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.
- debit day means the day that payment by you to us is due.
- debit payment means a particular transaction where a debit is made.
- direct debit request means the Direct Debit Request between us and you.
- us or we means Agreement Ophir Health Services Pty Ltd ATF Ophir Trust T/A Twin Waters Pharmacy, (the Debit User) you have authorised by signing a direct debit request.
- you means the customer who signed the Direct Debit Request.
- your financial institution means the financial institution nominated by you on the DDR at which the account is maintained.

1. Debiting your account

By signing a Direct Debit Request, you have authorised us to arrange for funds to be debited from your account. You should refer to the Direct Debit Request and this agreement for the terms of the arrangement between us and you.

We will only arrange for funds to be debited from your account as authorised in the Direct Debit Request

If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day.

If you are unsure about which day your account has or will be debited you should ask your financial institution.

2. Amendments by us

We may vary any details of this agreement or a Direct Debit Request at any time by giving you at least fourteen (14) days' written notice.

3. Amendments by you

You may change, stop or defer a debit payment, or terminate this agreement by providing us with at least fourteen (14) days' notification by writing to: Twin Waters Pharmacy Shop 6 175 Ocean Drive Twin Waters Qld 4564 or by telephoning us on 07 5457 0009 during business hours or arranging it through your own financial institution.

4. Your obligations

It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the Direct Debit Request.

If there are insufficient clear funds in your account to meet a debit payment:

- (a) you may be charged a fee and/or interest by your financial institution;
- (b) you may also incur fees or charges imposed or incurred by us; and
- (c) you must arrange for the debit payment to be made by another method or arrange for sufficient clear funds to be in your account by an agreed time so that we can process the debit payment.

You should check your account statement to verify that the amounts debited from your account are correct

5. Dispute

If you believe that there has been an error in debiting your account, you should notify us directly on 07 54570009 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly. Alternatively you can take it up with your financial institution direct.

If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding in writing.

6. Accounts

You should check:

- (a) with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions.
- (b) your account details which you have provided to us are correct by checking them against a recent account statement; and
- (c) with your financial institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.

7. Confidentiality

We will keep any information (including your account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.

We will only disclose information that we have about you:

- (a) to the extent specifically required by law; or
- (b) for the purposes of this agreement (including disclosing information in connection with any query or claim).

8. Notice

If you wish to notify us in writing about anything relating to this agreement, you should write Twin Waters Pharmacy Shop 6 175 Ocean Drive Twin Waters Qld 4564.

We will notify you by sending a notice in the ordinary post to the address you have given us in the Direct Debit Request.

Any notice will be deemed to have been received on the third banking day after posting.