



FINANCE PAYMENTS – Automatic Payment Authority (NZD)

PROTECT YOURSELF FROM CREDIT CARD FRAUD – PLEASE **DO NOT EMAIL** THE COMPLETED FORM. Please post completed authority.

Owner Details (please print)

Name/s: _____ DOB: ____/____/____
 _____ DOB: ____/____/____
 Mailing Address: _____
 City, State & Postcode: _____ Country: _____
 Daytime Phone(s): _____ Mobile Phone(s): _____
 Email: _____
 Owner Number: _____ Contract Number: _____

Payment Frequency: (Please select one)

Finance Only: Weekly Fortnightly Monthly
 Finance Start Date: To commence on first repayment date or ____/____/____ (Refer terms of the Contract & Mortgage)
 Monthly Payments – Payments are due monthly (or next business day if applicable). | Fortnightly & Weekly Payments – Payments will start the following Friday after receipt of this form.
 Arrears – If applicable, will be processed upon receipt unless otherwise requested. Date requested: ____/____/____

Payment Method: (Please select only ONE payment method – either A or B – complete and sign below)

Option A Credit Card (New Zealand Dollars Only)

I authorise Wyndham Vacation Resorts (NZ) Limited, as agent for Finance by Wyndham Pty Ltd (ARSN 091 790 993) to direct debit my Credit Card:
 Cardholders Name: _____
 Card Number: _____ Expiry Date: ____/____
 Visa Mastercard Amex Diners
 Your Signature(s): _____ Date: ____/____/____

OR Option B Savings/Cheque Accounts (New Zealand Dollars Only)



BANK INSTRUCTIONS

Name (Of Bank Account) _____

Bank Account from which payments are to be made:

Bank: _____ Branch Number: _____ Account Number: _____ Suffix: _____

(Please attach an encoded deposit slip to ensure your number is loaded correctly)

TO: The Bank Manager,

Bank: _____
 Branch: _____
 Address (in full): _____

I/we authorise you until further notice in writing to debit my/our account with you all amounts which
Wyndham Vacation Resorts (NZ) Limited – Finance Account
 (hereinafter referred to as the Initiator) the register Initiator of the above Authorisation Code, may initiate by Direct Debit.

I/we acknowledge and accept that the bank accepts this authority only upon the conditions listed overleaf.

INFORMATION TO APPEAR ON MY/OUR BANK STATEMENT (TO BE COMPLETED BY INITIATOR):

Payer Particulars: W Y N D H A M Payer Code: _____ Payer Reference: _____

Your Signature(s): _____ Date: ____/____/____

AUTHORITY TO ACCEPT DIRECT DEBITS
(Not to operate as an assignment or agreement)

AUTHORISATION CODE
0312184

FOR BANK USE ONLY

Approved
1218
07 09

Original - Retain at Branch | Copy - Forward to Initiator if requested

Date Received: _____ Recorded by: _____ Checked by: _____

BANK STAMP

This section has intentionally been left blank.

Conditions of this Authority to Accept Direct Debits

1. Wyndham Vacation Resorts (NZ) Limited (the "Initiator"):

(a) Undertakes to give notice to the Acceptor of the commencement date, frequency and amount **at least 10 calendar days before** the first Direct Debit is drawn (but no more than 2 calendar months). This notice will be provided either:

(i) in writing; or

(ii) by electronic mail where the Customer has provided prior written consent to the Initiator

Where the Direct Debit system is used for the collection of payments which are regular as to frequency, but variable as to amounts. The initiator undertakes to provide the Acceptor with a schedule detailing each payment amount and each payment date.

In the event of any subsequent change to the frequency or amount of the Direct Debits, the initiator has agreed to give advance notice of **at least 30 days before** changes come into effect. This notice must be provided either:

(i) in writing; or

(ii) by electronic mail where the Customer has provided prior written consent to the Initiator

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

(c) Where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of 1(a) above, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of the Direct Debit back to the Initiator through the Initiator's Bank, PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.

3. The Customer acknowledges that:-

(a) This authority will remain in full force and effect in respect of all Direct Debits passed to 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 disputes lies between me/us and the Initiator.

(d) Where the Bank has 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 Debits

(e) The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give written advance notice correctly nor 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.

(f) Notice given by the Initiator in terms of clause 1(a) to the debtor responsible for the payment shall be effective. Any communication necessary because the debtor responsible for payment is a person other than me/us is a matter between me/us and the debtor concerned.

4. The Bank may:-

(a) In its absolute discretion conclusively determine the order of priority 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 the Bank.

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

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