

SafeParks is the security initiative of PRABOA

RESIDENT'S INFORMATION AND DEBIT ORDER AUTHORITY

PHYSICAL A	DDRESS:			
CONTACT D	ETAILS: TEL HOME:	TEL WORK:		
CELL:	E-MAIL:			
	AGREEMENT WITH SAFEPARKS SECURITY SO	CHEME_		
E (NAME):				
Security Initiat	d hereby apply, with effect from the date upon which the five (security initiative of PRABOA) formed to promote the Parks/PRABOA, to debit my / our account in the sum	he provision of se		
	Select the relevant Package		Χ]
	PSS Only R417			
	PSS and Armed Response R749			_
	Seniors PSS Only (65 years and older) R304.7	70		_
		or older) DEGG		
	Seniors PSS and Armed Response (65 years	or older) R599		J
COUNT NAME:	Seniors PSS and Armed Response (65 years	,		
		,		
COUNT NAME: NK NAME: ANCH NAME:	Seniors PSS and Armed Response (65 years	UMBER:		
NK NAME:	Seniors PSS and Armed Response (65 years ACCOUNT NBRANCH COL	UMBER:		

This is to authorise you to issue and deliver payment instruction against my abovementioned account or any account to which I may transfer my account for collection. The amount must not exceed the published amount recommended by the Association's committee as a donation or contribution in respect of membership of the Association, plus a donation or contribution towards the provision of security in the public spaces of Parkhurst and Armed Response. This provision is not limited to contributors' use but is for the general benefit of all in Parkhurst. If PSS and Armed Response is elected, the payment also includes monies due

on the 5th of May you will only be debited on the 27th of May for June. SafeParks will therefore not charge you for the month of

to DLL Security Services (Pty) Ltd t/a 24/7 Security Services under the agreement between them and my/ourselves.

May.

If the regular debiting date falls on a Saturday Sunday or a public holiday or other day on which such debiting facilities are unavailable, the debit will be initiated on the following day.

We require a full calendar month's written notice by email to <u>safe@safeparks.joburg</u> to cancel your debit order. Conditions imposed by SARS prevent refunds unless this was attributable to some fault of PRABOA/SafeParks.

I / We understand that the withdrawals hereby authorised will be processed through a computerized system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and "PRABOA/SafeParks" should enable you and us to identify this Agreement. A payment reference is added to this form before the issuing of any payment instruction.

MANDATE: I / We acknowledge that all payment instructions issued by you shall be treated by my/our above mentioned bank as if the instructions had been issued by me/us personally.

This authority may be cancelled by me/us by giving **SafeParks** one full calender month's written notice by email to **safe@safeparks.joburg**, but I / we understand that we shall not be entitled to any refund of amounts which **SafeParks** may have withdrawn while this authority was in force if such amounts were legally owing to **SafeParks**.

ASSIGNMENT:	I / We acknowledge that the party hereby authorised to effect the drawing(s) against my / our account may not cede or assign any of its rights to any third party without my / our prior consent and that I / we may not delegate any of my / our obligations in terms of this contract / authority to any third party without prior written consent of the authorised party.				
DATE		SIGNATURE			