Direct Debit Authority Form

About this form

This form is for regular direct debits into the Pie KiwiSaver Scheme. For help completing this form, phone **0800 586 657**. Once complete, please email an electronic copy to **kiwisaver@piefunds.co.nz**

Invest	tor deta	ails						
Title	First nan	ne/s					Last na	ame
Pie KiwiSaver Scheme account number (if known) Date of first payment Amount								
								\$
Note: Plea	ase choose a	date at least 5 business	da	ys after you submit th	is 1	form		
Frequer	ncy							
We	eekly	Fortnightly		Monthly Qu	ıaı	rterly	Annuall	lly
Bank	instruc	tions						
Му ассо	ount to be	e debited						INITIATOR'S AUTHORISATION
Accoun ⁻	t name			Name of bank				CODE
								0232594
Accoun ⁻	t number							APPROVED
								3259 08/18
From	the acc	eptor to my b	aı	nk				
I authorise you to debit my account with the amounts of direct debit instructions received from Pie KiwiSaver Scheme (the								
'Initiator') with the authorisation code specified on this authority and in accordance with this authority until further notice								
from me. I agree that this authority is subject to:								
 my bank's terms and conditions that relate to my account, and the terms and conditions listed below. 								
Signatu	re 1	Date						
Signatu	re 2 (if ap	plicable) Date						
	- (- 1	,						
Speci	fic con	ditions relatin	g	to notices ar	nc	d dispute	S	
1. I agree that the Initiator must give me at least 10 days' prior notice of each direct debit, including the first direct debit in a series								
2. Changes to the amounts or dates of a series of direct debits require 30 days' prior notice to me.3. I can also agree with the Initiator to receive a same day notice for direct debits specifically requested by me.								
4. All notices must be in writing, but can be delivered electronically, if I have agreed that with the Initiator.								
5. I can also ask you to reverse a direct debit up to 120 days after the direct debit if:								
		e proper notice of the						
 I received notice but the amount or date of the direct debit is different from the amount or date on the notice. If you dishonour a direct debit but the Initiator retries it within 5 business days of the original direct debit, I understand that the 								
		t need to notify me					icss day.	ys of the original ances debit, i anderstand that the
For bank use only								
Date rece		Recorded by		Checked by		Bank stamp		
		-]	,		,		

