



## www.sunshinecoasttourism.co.za

tourism@sunshinecoasttourism.co.za

046 624 1235

A. Authority/Mandate: Paper/Electronic	
Given by (name of Accountholder):	
Address:	
ID no/Business reg no:	
Bank Account Detail	
Bank Name:	
Branch Name and Town:	
Branch Number:	
Account Number:	
Type of Account:	Current (cheque) / Savings / Transmission
Date:	
Contact Number:	
Amount:	
To (Name of Beneficiary):	
Address:	
Abbreviated Shortname to be used:	SUNSHINECT
Refer to contract reference number	("the Contract Reference Number")
	,
I/We hereby authorise Netcash (Pty) Ltd to issue and abovementioned account at my/our abovementioned bank or obligations as agreed to in the Contract Reference Number.	deliver payment instructions to your banker for collection against my/our n condition that the sum of such payment instructions will not differ from my/our
The individual payment instructions so authorised must be is is due and the amount of each individual payment instruction	ssued and delivered on the date when the obligation in terms of the Agreement n may not differ as agreed to in terms of the Agreement.
	arry the Contract Reference Number, included in the said payment instructions, id Contract Reference Number should be added to this form in section E before rectly after having been completed.
I /we agree that the first payment instruction will be issued aof each month.	nd delivered on(date) and thereafter regularly on the
If however, the date of the payment instruction falls on a non- may be debited against my account on the following business	processing day (weekend or public holiday) I agree that the payment instruction as day; or
Subsequent payment instructions will continue to be delivered been paid or until this authority is cancelled by me/us by giving clause) and sent by prepaid registered post or delivered to y	ed in terms of this authority until the obligations in terms of the Agreement have ng you notice in writing of not less than the interval (as indicated in the previous our address indicated above.

## B. MANDATE

I/we acknowledge that all payment instructions issued by you will be treated by my/our abovementioned bank as if the instructions had been issued by me/ us personally.

## C. CANCELLATION

I/we agree that although this authority and mandate may be cancelled by me/us, such cancellation will not cancel the Agreement. I/we also understand that I/we cannot reclaim amounts, which have been withdrawn from my/our account (paid) in terms of this authority and mandate if such amounts were legally owing to you.











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<b>D.</b> ASSIGNMENT: I/We acknowledge that this authority may be ceded or assigned to a third part	ry if the Agreement is also ceded or assigned to that third party
Signed on this day of	
SIGNATURE AS USED FOR OPERATING ON THE ACCOUNT	
ASSISTED BY FOR OFFICE USE	CAPACITY
E. AGREEMENT REFERENCE NUMBER	
THE AGREEMENT REFERENCE NUMBER IS	



