



Application Form

1. Personal details

Title	Full Names	Surname	
ID Number	Cell Number	Tell Number	
Residential Address	Postal Address		
Nationality	Email Address		
Occupation	Have you ever had an incident or initiated legal action against any of the following?		
Do you have any pending legal cases?	1) Road accident fund		
	2) Medical Professional		
	3) Domestic violence		

2. Family Details

Number of dependants		Next of Kin	
Details of dependants			
Full Names	Surname	ID Number	

3. Debit order details

Authority and Mandate for payments Instruction: Electronic and Written Mandates

Given by (<i>Name of account holder</i>)	
Address	

Bank	
Branch code	
Account number	
Type of account	
Amount	
Date	
Contact name	
Contact number	
Abbreviated name as registered by bank	<u>INSISTRISK</u>

This signed Authority and Mandate refers to our contract dated (“the Agreement”).

I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank (or any other bank or branch to which I/we may transfer my/our account) on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on _____ and continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing of not less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address as indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows: monthly.

In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the preceding ordinary business day.

Payment Instructions due in December may be debited against my account on _____

I / We understand that the withdrawals hereby authorized 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 if provided to you should enable you to identify the 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 have been issued by me/us personally.

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 shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force, if such amounts were legally owing to you.

Assignment

I/We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.

Signed at _____ on this _____ day of

(Signature as used for operating on the account)

(Assisted by)

Agreement reference number is _____