

# DIRECT DEBIT REQUEST SERVICE AGREEMENT

Debit User's name: Health Services Union - SA/NT Branch ("we" or "us") With ABN: 68243768561

Debit User's address: 170 Greenhill Road, Parkside SA 5063  
User ID: 2041 2581.01

You have entered or are about to enter into an arrangement under which you make payments to us. You want to make those payments by use of the Direct Debit System. Therefore you authorise and request us to debit your account through the "Bulk Electronic Clearing System (BECS).

This agreement sets out the terms on which we accept and act under a Direct Debit Request ("your Direct Debit Request") you give us permission to debit amounts from your account under the Direct Debit System. It is additional to the arrangement under which you make payments to us.

Please ensure you keep a copy of this agreement as it sets out certain rights and obligations you have with us by giving us your Direct Debit Request

## When are we bound by this agreement?

1. We agree to be bound by this agreement when we receive your Direct Debit Request complete with the particulars we need to draw an amount under it.

## What we agree and what we can do:

2. We only draw money out of your account in accordance with the terms of your Direct Debit Request.

3. If there is a variation to any of the debit arrangements, we will provide you with not less than 14 days' notice. These may be:

- Change the terms of arrangement;
- Change the terms of your Direct Debit request; or
- Cancel your Direct Debit Request.

We may send you notices either electronically to your email address, or by ordinary post to the address you have given us. Any notice will be deemed received on the third banking day after emailing or posting.

4. You may ask, giving us not less than 14 days notice before payment date, to advise of:

- Alteration of the terms of your Direct Debit Request;
- Deferment of payment to be made under your Direct Debit Request;
- Stop a drawing under your Direct Debit Request; or
- Cancellation of your Direct Debit Request by:

Informing us in writing of the change you require and the reason for the change. Our contact details are: Health Services Union SA/NT, 170 Greenhill Road, Parkside SA 5063. Stops and cancellations of your Direct Debit Requests can be directed to us or your own Financial Institution.

## What you agree to do as a member:

5. Membership fees are paid in advance on a set cycle of payments occurring fortnightly, quarterly and yearly.

6. We will deal with any dispute under clause 6 of this agreement as follows: We will investigate the dispute and if it is found that the amount has been debited in error we will refund you the disputed amount within 14 days. Where it is found that the disputed amount has been debited correctly and in accordance to the terms of the Direct Debit Agreement, we will notify you of that outcome in writing within 14 days.

7. You may dispute any amount we draw under your Direct Debit Request by notifying us of your dispute by letter and provide us details of the payment you are disputing and reasons for the dispute. We will endeavour to resolve any dispute within 14 days. Disputes may also be directed to your own Financial Institution.

8. If your financial institution rejects any of our attempts to draw an amount in accordance with your Direct Debit Request, we may charge you for any fees incurred to us by our financial Institution as a result of the reject. We will contact you within the next business day to discuss a reattempt to draw the funds from your bank account in accordance with your Direct Debit Request, or to arrange alternative methods of payment. If your credit card declines the payment, we will reattempt the payment without contacting you in the first instance.

## Privacy agreement:

9. We will not disclose to any person any information you give us on your Direct Debit Request, which is not generally available, unless:

- You dispute any amount we draw under your Direct Debit Request, where we will be required to disclose your information to your Financial Institution in order to investigate the dispute;
- You consent to that disclosure; or
- We are required to disclose that information by law.

10. Direct Debit, through BECS is not available on all accounts. You are advised to check your account details against a recent statement from your financial institution (ledger FI) and if uncertain, please check with your financial Institution before completing the Direct Debit Request.

11. If you are uncertain as to when the debit will be processed to your account, then you should enquire directly to your financial institution (ledger FI)

12. It is your responsibility to ensure there are sufficient clear funds available in your relevant account, by the due date to allow for the payment of debit items according to the relevant Direct Debit Request.

13. We state that the Debit User's policy on the privacy of Customer records and account details, while noting that the Bank may require such information to be provided in the event of a claim or relating to an alleged incorrect or wrongful debit.

For any queries or any matters relating to these direct debit arrangements members should contact Health Services Union SA/NT at 170 Greenhill Road, Parkside SA 5063, or phone (08) 8279 2255 or e-mail [info@hsusant.org.au](mailto:info@hsusant.org.au).

## HSU SA/NT CURRENT SUBSCRIPTION RATES (INCLUDING GST)

Membership fees are paid in advance on a set cycle of payments occurring fortnightly, quarterly and yearly. Initial pro rata payments are made in order to align to the nominated cycle of payments.

Classification	Hours	Fortnightly	Quarterly	Yearly
Full Time	Regular weekly working hours are 30 hours or <b>MORE</b>	\$17.94	\$116.61	\$466.44
Part Time <sup>1</sup>	Regular weekly working hours are <b>LESS</b> than 30 hours	\$15.74	\$102.31	\$409.24
Part Time <sup>2</sup>	Regular weekly working hours are <b>LESS</b> than 15 hours	\$12.94	\$84.11	\$336.44

\*For **casual** workers, the above rates will apply to your estimated hours per week.