

## Direct Debit Service Application Form

CUSTOMER INFORMATION		xisting Customer		omer No. / Account No. / Service No.				Identity Document           National ID Card         Work permit         Passport           (for Maldivians)         Registration Certificate						
	Company/Office/Applicant's Na					1 1	1 1	T	1 1	I				
	New Customers													
	Date of Birth: DDDM	MYY	Y Y O Male	Female		Account No. /	Service No	o. to be bil	led on					
	PERMANENT ADDRESS Nat	tionality:	Title:		SERVICE ADDRESS (If different from Permanent Address)									
	House/Building name:			House/Building name:										
	Road:				Road:									
	District:	Block no:			District:				Bloo	ck no:				
	Atoll, Island:				Atoll, Island:									
	Email:													
			Contact No's:											
SERVICE REQUESTED	Account(s) to be paid by Din Please enter appropriate Dhiraag 1 4 7	gu Account Numbers	2			6								
DECLARATION & SIGNATURES	To the Chief Executive Officer of (Please specify Bank of Maldives I/we confirm that I/we wish to ut with the amount of my/our bill(s) I/we indemnify and relieve the ba Direct Debit Facility. Name: Contact Person (if different from the	; PLC/State Bank of illize the Direct Debi ) as informed to you ank from and agains	India, Male' Branch) t facility to settle my/ou by Dhiraagu in respect (	r Dhiraagu bills. T of the Dhiraagu A	Account numbers(	s) listed below.						iove		
	Name:			Contact Nur	Contact Number:									
	Bank Account number:			Dhiraagu Se	Dhiraagu Services Account Number(s):									
	ID Card No:		Date:	e: Signature				'e:						
DIRECT DEBIT GUARENTEE	<ul> <li>If Dhiraagu makes an error, you are guaranteed a full immediate credit of any amount overpaid</li> <li>You can cancel Direct Debit at anytime by writing to your bank. Please make sure you send a copy of your letter to Dhiraagu.</li> <li>Notes: <ol> <li>The bank reserves the right to refuse to accept Direct Debit authority to any particular customer.</li> <li>The bank reserves the right to refuse any particular payment request.</li> <li>Dhiraagu reserves the right to cancel Direct Debit arrangement.</li> <li>A valid ID Card must be submitted with this application for individuals, and for companies a board resolution should be submitted along with this application form.</li> </ol> </li> </ul>													
TERMS & CONDITIONS	<ol> <li>Applicant for Direct Debit servi</li> <li>Signature on the application for</li> <li>A 2% discount will be applied for</li> <li>Dhiraagu has the right to term</li> <li>If Direct Debit transaction is re</li> </ol>	orm and the bank ac to every monthly bil ninate the offer as ar	ccount signature must be Il until the account is ren nd when decided by the	noved from Direc management.		d from Direct Del	oit servic							