

# APPLICATION FORM FOR DIRECT DEBIT-MCB

Date: .....

The Manager,  
**The Mauritius Commercial Bank Ltd.,**

.....

Bank Account to be debited:																				
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Dear Sir / Madam,

I/We hereby authorize you to debit my/our account, particulars of which are provided above, with the amount claimed for by ..... and credit their account, quoting the following reference number:

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Furthermore, I/we agree and acknowledge that:

- The Mauritius Commercial Bank Ltd.:
  - ought not to advise me/us of such entries passed to my/our account;
- In the event of any dispute arising in connection with the amount payable, I/we shall settle the matter directly with .....
- Such payment order shall:-
  - be executed only if my account mentioned above has sufficient available funds;
  - remain in force until further notice.

I/We also authorise you to debit my/our account with bank charges, if applicable.

Yours faithfully,

Signature: .....

Signature:.....

Name: .....

Name: .....