

Tenant Instructions for Completing the DDR Form

Please note that incomplete forms will delay your registration

Ray White. REAL ESTATE Tenant Direct Debit Request

STEP 1 - TENANT CONTACT DETAILS

Title: Ms First Name: Emily Last Name: Davie
 Tenant No: _____ PMS PropertyID: _____
 System allocated: _____ Office use only: _____
 Addr. Line One: Unit 4
 Addr. Line Two: 655 Smith Street
 Suburb: Sydney State: NSW Postcode: 2000
 Home Phone: 02 1234 1234 Business Phone: 02 1111 1111
 Fax: 02 2222 2222 Mobile Phone: 0414 123 456
 Email Address: edavie@raywhite.com Date of Birth: 3-Mar-80
 Licence or Passport No for ID: _____ Name of Property Mgr: _____
 Tick for RW Connect to contact you and arrange your Utility connections. Move Date: _____
 Tick for RW Insurance to contact you and arrange your contents insurance.

Leave Tenant # & PMS Property ID blank.

Complete all contact details in full, including DOB for security purposes.

Select how payments should be initiated; Tenant initiated by yourself, Over the Counter at Bill Express Newsagents, or a recurring payment schedule configured by your agent.

STEP 2 - PAYMENT SCHEDULE (Tick one box)

Tenant initiated payments: Telephone / Internet / Recurring Schedule (Go to Step 3)
 Over the Counter: Bill Express Newsagents (Go to Step 4)
 Recurring Schedule Configured by Managing Agent
 Rent Amount: \$350 Frequency: Weekly Commencement Date: 1/10/2007
(Monthly, 4 Weekly, Fortnightly or Weekly)
 Please note, the applicable payment fee will be added to the Rent Amount shown above at the time of payment. (Go to Step 3)

If recurring option is selected, complete the Amount, Frequency and Start Date for your payments.

STEP 3 - *TENANT ACCOUNT DETAILS (Funds debited from this account for rent payments)

Please debit my credit card, listed below: * Please note this section must be completed even when tenant initiated payments are selected under Payment Schedule.
 Please debit my bank account, listed below:

Credit Card Details
 Card Type: Visa Mastercard
 Name on Card: _____
 Credit Card No: _____ Expiry Date: _____
 OR
 Account Details
 Account Name: Emily Davie
 Financial Institution: NAB Suburb: Sydney
 BSB (6 Digits): 062-504 Account Number (Max 9 digits): 123456789

Select your preferred payment option noting the differing fee structures (please see Terms and Conditions).

Complete the appropriate bank account or credit card details in full **only** if you have opted for Tenant initiated payments or recurring schedule configured by your agent.

STEP 4 - REQUEST AND AUTHORITY TO DEBIT

I/We hereby request and authorise IP Payments Pty Ltd (Debit User No. 306033 & 252550) to debit my/our nominated bank account or credit card identified above through the Bulk Electronic Clearing System or credit card network for any amount that IP Payments may debit or charge in accordance with the Terms and Conditions set out below. (Where account has two signatures, both must sign below.)

Name: Emily Davie Date: 14/09/07 Name: _____ Date: _____

Signature 1: E. Davie Signature 2: _____

Enter the date and sign where indicated. If a joint account is used then both signatures are required.