



Direct Debit Request Form

(Premises Name)

(Premises Number)

I/We

(Full Name / Company Name)

(Address)

Authorise the NSW Office of Liquor, Gaming and Racing and Office of State Revenue, until further notice in writing to arrange for funds to be debited from my/our account, at the Financial Institution identified and as described in the schedule below, any amounts which the NSW Office of Liquor, Gaming and Racing or Office of State Revenue, (Debit Users) may debit or charge me/us through the Direct Debit System.

Please note: The Office of State Revenue's User Identification Number is 231250 for collection of gaming tax and penalties. The NSW Office of Liquor, Gaming and Racing's User Identification Number is 250618 for collection of fees, fines and other payments.

Direct Debit Request Authorisation

Account held in the name of: _____

Financial Institution's BSB _____

Account Number: _____

Financial Institution's Name / Address: _____

Please note: Direct debiting is not available on the full range of accounts. If in doubt, please refer to your Financial Institution.

Direct Debit Request Authorisation

I/We have read the attached "Direct Debit Customer Service Agreement" and acknowledge and agree with its terms and conditions.

I/We request this arrangement to remain in force in accordance with the details set out in the Schedule described above and in compliance with the "Direct Debit Customer Service Agreement"

Customer(s) Name: _____

Customer(s) Signature: _____

Date: _____



Direct Debit Customer Service Agreement

The NSW Office of Liquor, Gaming and Racing and Office of State Revenue (OSR) notes its commitment to you as the following:

- We (or our agents) will advise you by invoice of all drawings.
- When a due date for drawing falls on a non-business day, we will draw the amount on the next business day.
- We reserve the right to cancel the drawing arrangement if drawings are returned unpaid by your nominated Financial Institution. An administration fee may apply for drawings that are returned unpaid.
- We will keep all information pertaining to your nominated account at the Financial Institution private and confidential.
- We will investigate and deal promptly with any queries, claims or complaints regarding debits, providing a response within 20 business days.
- We will notify you at least 14 days in advance of any changes to the terms of this Agreement.

You note and acknowledge your commitment to us as to the following:

- It is your responsibility to check with your Financial Institution prior to completing the Direct Debit Request that direct debiting is available on the nominated account.
- It is your responsibility to ensure at all times that sufficient funds are available in the nominated account to meet a drawing on the due date for payment.
- It is your responsibility to advise us, immediately in writing, if the account nominated by you to receive the drawings is altered transferred or closed.
- It is your responsibility to arrange with us a suitable alternate payment method, if the drawing arrangements are stopped, by either you or the nominated Financial Institution.
- It is your responsibility to meet any charges resulting from the use of the Direct Debit System. This may include fees charged to, and by us, as a result of returned drawings.
- You may cancel the Direct Debit arrangement at any time by giving written notice to us. Such notice should be received by us no later than 10 business days prior to the cancellation date. Your nominated Financial Institution is unable to cancel your Direct Debit Arrangement or to defer a drawing.
- All transaction disputes, queries and claims should be raised directly with us either by writing to the NSW Office of Liquor, Gaming and Racing, GPO Box 7060, SYDNEY, NSW 2001 or by telephoning our CMS Business Unit on 02 9995 0468 or by writing to the Office of State Revenue, GPO Box 4042, SYDNEY, NSW 2001 or by telephoning the OSR on 1300 139 817 or 02 9689 6200 (for interstate callers). We will provide a verbal or written response within 20 business days from the date of notice. If the claim / dispute is successful, we will reimburse you by way of cheque or electronic credit to your nominated account.



Direct Debit Request Form

| | |
|------------------------|----------------------|
| | |
| <i>Premises Number</i> | <i>Premises Name</i> |

I/We

| | |
|---|----------------------------------|
| | |
| <i>Surname or Company/Business Name</i> | <i>Given name/CAN/ABN number</i> |

| | |
|----------------|-----------------|
| | |
| <i>Address</i> | |
| | |
| <i>Address</i> | <i>Postcode</i> |

Authorise Data Monitoring Services, a division of Maxgaming NSW Pty Ltd ABN 51 078 250 423 (User ID 123 651), until further notice in writing to arrange for funds to be debited from my/our account, at the Financial Institution identified and as described in the Schedule below, any amounts that Data Monitoring Services (Debit User) may debit or charge me/us through the Direct Debit System.

The Schedule

Details of account to be debited:

| | |
|------------------------------------|-----------------------|
| | |
| <i>Account held in the name of</i> | |
| | |
| <i>Financial Institution's BSB</i> | <i>Account Number</i> |

| | |
|--|-----------------|
| | |
| <i>Financial Institution's Name</i> | |
| | |
| <i>Financial Institution's Address</i> | |
| | |
| <i>Financial Institution's Address</i> | <i>Postcode</i> |

Please note: direct debiting is not available on the full range of accounts. If in doubt, please refer to your Financial Institution.

Direct Debit Request Authorisation

I/We have read the 'Customer Service Agreement' and acknowledge and agree with its terms and conditions.

I/We request this arrangement to remain in force in accordance with details set out in the Schedule described above and in compliance with the 'Customer Service Agreement'.

| | |
|-------------------------------|---|
| | |
| <i>Signatory 1: Name</i> | <i>Signatory 2 (if applicable): Name</i> |
| | |
| <i>Signatory 1: Signature</i> | <i>Signatory 2 (if applicable): Signature</i> |
| | |
| <i>Date</i> | <i>Date</i> |



Customer Service Agreement

We, **Data Monitoring Services** (DMS), a division of Maxgaming NSW Pty Ltd ABN 51 078 250 423 (**User ID 123651**), note our commitment to you as the following:

We will advise you by invoice of the drawings.

Where the due date falls on a non-business day, we will draw the amount on the next business day and payment will be accepted as payment on the due date.

We reserve the right to cancel the drawing arrangement if drawings are continually returned unpaid by your nominated Financial Institution. An Administration Fee may apply for drawings that are returned unpaid. In the event of excessive funds being withdrawn DMS undertakes to investigate the matter promptly and to reimburse the venue for any excess amount withdrawn as well as any bank charges that may be incurred by the venue.

We will keep all information provided by you and details of your nominated account at the Financial Institution, private and confidential.

We will investigate and promptly deal with any queries, claims or complaints regarding debits, providing a response within 20 business days.

You note your commitment to us as the following:

| | |
|---|----------------------------------|
| <input type="text"/> | <input type="text"/> |
| <i>Surname or Company/Business Name</i> | <i>Given name/CAN/ABN number</i> |
| <input type="text"/> | |
| <i>Address</i> | |
| <input type="text"/> | <input type="text"/> |
| <i>Address</i> | <i>Postcode</i> |

It is your responsibility to check with your Financial Institution prior to completing the Direct Debit Request that direct debiting is available on that account.

It is your responsibility to ensure that the authorisation on the Direct Debit Request is identical to the account signing instruction held by the Financial Institution of the nominated account. Two people are to sign the Direct Debit Request if two signatures are required to operate the account.

It is your responsibility to ensure at all times that sufficient funds are available in the nominated account to meet a drawing on the due date for payment.

It is your responsibility to advise us if the account nominated by you, to receive the drawings is altered, transferred or closed.

It is your responsibility to arrange with us a suitable alternate payment method, if the drawing arrangements are stopped, either by you or the nominated Financial Institution.

It is your responsibility to meet any charges resulting from the use of the Direct Debit System. This may include fees charged to us as a result of returned drawings.

You may cancel the Direct Debit arrangement at any time by giving written notice to us. Such notice should be received by us at least 10 business days prior to the cancellation date. Your nominated Financial Institution is unable to cancel your Direct Debit Arrangement.

All transaction disputes, queries and claims should be raised directly with us by either writing to us at Data Monitoring Services, PO Box 1528 Strawberry Hills NSW 2012 or phoning our customer services centre on 1800 307 551. We will provide a verbal or written response within 20 business days from the date of the notice. If the claim/dispute is successful, we will reimburse you by way of cheque or electronic credit to your nominated account.