



DIRECT DEBIT AUTHORITY

Authority to accept Direct Debits (Not to operate as an assignment or agreement)
Please complete and return to Cigna Life Insurance, Freepost 11 8004, PO Box 24031, Wellington 6142.

1 YOUR DETAILS

Please print your details clearly in CAPITAL letters using a pen

Name List all Cigna Policy number(s)

Premium Deduction Frequency (please tick one)

Fortnightly

Deduction Start Date eg. Monday 16 June

Your Premium Deduction will occur on the same day of the week each fortnight

OR

Monthly Half-yearly Yearly

Deduction Start Date eg. 1st-28th

Your Premium Deduction will occur on the same date each month, half year or year, as selected

2 BANKING DETAILS

Name of account (customer to complete)

Please provide your branch number, account number and suffix of the account to be debited in the spaces provided below

Bank and branch number: Account number: Suffix:

AUTHORISATION
CODE
0100547

Bank and branch

Address (PO Box) Town/City

3 AUTHORISATION

I authorise you to debit my account with the amounts of direct debit instructions received from Cigna Life Insurance New Zealand Limited with the authorisation code specified on this authority and in accordance with this authority until further notice from me. I agree that this authority is subject to:

- my bank's terms and conditions that relate to my account, and
- the terms and conditions listed below.

Signature Date / /

CONDITIONS OF THIS AUTHORITY

- 1) Cigna is required to give written notice of the amount and date of each direct debit in a series no less than 2 calendar days before the date of the first direct debit in the series. The notice is to include the dates of the debits and the amount of each direct debit.
- 2) If Cigna proposes to change an amount or date of a direct debit specified on the notice, Cigna is required to give you written notice no less than 10 calendar days before the change.
- 3) I may ask my bank to reverse a direct debit up to 120 calendar days after the debit if:
 - I don't receive a written notice of the amount and date of each direct debit from Cigna, or
 - I receive a written notice but the amount or the date of debiting is different from the amount or the date specified on the notice.
- 4) If the bank dishonours a direct debit but Cigna sends the direct debit again within 5 business days of the dishonour, Cigna is not required to give you a second notice of the amount and date of the direct debit.
- 5) All notices must be in writing, but can be delivered electronically, if I have agreed that with Cigna.

BANK USE ONLY - ORIGINAL RETAIN AT BRANCH

Approved

0054 | 08/19

Date Received

Recorded by

Checked by

(Stamp)