DIRECT DEBIT AUTHORISATION 直接付款授權書

_	day	日 /	month	月	/	year 年	
Date 日期							,

- Note 注意: 1. Please tick where applicable. 請在適當的地方加上剔號。
 - 2. For HSBC customers, please return the completed form to the Bank or mail to Automatic Payments Centre, Payment Services at P O Box 72677, Kowloon Central Post Office, Kowloon, Hong Kong. You may also set up the direct debit authorisation through HSBC Internet Banking. For non-HSBC customers, please complete and return this form to your banker. 如屬滙豐客戶,請將已填妥的表格交回本行或寄回九龍中央郵政局郵政信箱 72677 號匯款服務自動轉賬中心。您亦可透過滙豐網上理財設立直接付款授權。如非滙豐客戶,請依次填寫並將此授權書交給貴戶的往來銀行。
 - 3. Your Direct Debit Authorisation set up request will normally be processed within 4 working days (excluding Saturday, Sunday and public holiday) upon receipt of your form. 在一般情况下,本行將在收到您的直接付款授權的設立申請表後四個工作天內(不包括星期六、日及公眾假期)處理您的申請。

Name of Party to be Credited (The Beneficiary) 收款的一方 (收款人)			Bank No. 銀行號碼	Branch No. 分行號碼	Account No. 戶口號碼			
HONG KONG SAFETY SERVICES ASSOCIATION LIMITED			0 0 4	4 9 1	8 4 4 4 6 0 1 8 3 8			
My/Our Bank Name and Branch 本人(等)的銀行及分行的名稱		Bank No. 銀行號碼	Branch No. 分行號碼	My/Our Account No. 本人(等)的戶口號碼				
My/Our Nam	e(s) as recorded on Stateme	ent/Passbook (in Block Letters) 本人 (等))在結單/存摺上所紀	錄的名稱 <i>(請以英文亞</i>	医横填寫)			
Contact Telephone No. 聯絡電話號碼 **Note 注意: If blank, the debtor's bank win 如無損害,付款銀行資務轉賬限額。 **Each Payment 每次 **If blank, the debtor's bank win 如無損害,付款銀行資務轉賬限額。 **Each Payment 每次			Expiry Date (day/month/year) 到期日 (日/月/年) Note 注意: If blank, this authorisation shall have effect until further notice and Expiry Date should be greater than 3 months. 如無填寫,此直接付款授權書將無限期有效宜至另行通知及到期日必須大於三個月。					
 My/Our Address as recorded on Statement/Passbook 本人(等)在結單/存摺上所編			錄的地址					
				(0)				
Debtor Name (in Block Letters) 付款人名稱 (請以英文正楷填寫) Note 注意: Please specify if other than Account Holder. 如非戶口持有人,請填寫。			Debtor Reference (Compulsory Field) 付款人編號 (必填之欄) (Reference between yourself and the party to be credited 貴暇戶與收款一方的編號)					
Declaration !	95- UH							
instruction the amou 行不時給予	ns as my/our Bank may red nt of any one such transfer 本人(等)銀行的指示)自本		ker and/or its bank ove. 本人(等)現長 轉賬金額不得超過以」	ter's correspondent E權本人(等)的上述 上指定的限額。				
_	•	實該等轉賬通知是否已交予本人(等)。	notice of any such	i transfer has been	given to me/us.			
	3. I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s). 如因該等轉賬而令本人(等)的戶口出現透支(或令現時的透支增加),本人(等)顧共同及個別承擔全部責任。							
4. I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorisation at any time on one week's written notice. 本人(等)同意如本人(等)的戶口並無足夠款項支付該等授權轉賬,本人(等)的銀行有權不予轉賬,且銀行可收取慣常的收費,並可隨時以一星期書面通知取消本授權書。								
no transac the direct 本直接付款	ction is performed on my/c debit arrangement without 授權書將繼續生效直至另行通		a continuous periouthorisation has not be be before the best and be be a continuous period at the best and be be be be be be better the best and be	od of 30 months, rot expired or there (等)同意如本人(等)已設立的直接付款授權的戶口連續三十個			
prior to th	e date on which such canc	lation or variation of this authorisation w sellation/variation is to take effect. 本授權書的任何通知,須於取消/更改生效日」	, 0	·	shall be given at least two working days			
My/Our Bank	Account Signature(s) 本人	、(等)銀行戶口的簽署						
Х								
	Remarks				Branch Chop			
For Bank Use Only 銀行専用								