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|  | | | | | | | | | | |  | Instruction to your bank or building society to pay by Direct Debit | | | | | | | | | | | | | | | | | |
| **Please fill in the whole form using a ball point pen and send it to:** | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
| South Yorkshire Housing Association Ltd  152 Rockingham Street  Sheffield  S1 4EB | | | | | | | | | | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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|  | **Service user number** | | | | | | | | | | | | | | | | | |
|  | **4** | | **4** | | **4** | | **3** | | **3** | | **0** | |  | |  | |  | |
|  |
| **Name(s) of account holder(s)** | | | | | | | | | | |  | **Reference** | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | |  | **Instruction to your bank or building society**  Please pay South Yorkshire Housing Association Ltd Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with South Yorkshire Housing Association Ltd and, if so, details will be passed electronically to my bank/building society. | | | | | | | | | | | | | | | | | |
| **Bank/building society account number** | | | | | | | | | | |  |
|  |  |  |  |  | | |  |  |  |  |  |
| **Branch sort code** | | | | | | | | | | |  |
|  |  |  |  |  | | |  |  |  |  |  |
| **Name and full postal address of your bank or building society** | | | | | | | | | | |  |
| To: The Manager | | | | | Bank/building society | | | | | |  |
|  | | | | | | | | | | |  |
| Address | | | | | | | | | | |  | Signature(s) | | | | | | | | | | | | | | | | | |
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| Banks and building societies may not accept Direct Debit Instructions for some types of account  DDI2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

This guarantee should be detached and retained by the payer.

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| DdlogolThe  Direct Debit  Guarantee |
| The Direct Debit Guarantee   * This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits |
| * If there are any changes to the amount, date or frequency of your Direct Debit South Yorkshire Housing Association Ltd will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request South Yorkshire Housing Association Ltd to collect a payment, confirmation of the amount and date will be given to you at the time of the request. |
| * If an error is made in the payment of your Direct Debit, by South Yorkshire Housing Association Ltd or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society   – If you receive a refund you are not entitled to, you must pay it back when South Yorkshire Housing Association Ltd asks you to |
| * You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us. |
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| Tenancy/Reference number  NOTE: Please also enter this in the reference box on page 1. |  |
| Account holder full name  NOTE: This can be different from the tenant’s name, but must be their full (first and last) name |  |
| Account holder address  NOTE: This can be different from the tenant’s address |  |
| 1st Payment Amount  NOTE: 1st payment must be at least 10 working days after set-up date. Therefore 1st payment amount can be for 2 weeks rent. |  |
| Date of 1st Payment  NOTE: 1st payment must be at least 10 working days after set-up date. |  |
| Subsequent Payment Amount |  |
| Subsequent Payment Date |  |
| Payment Frequency  Please circle the required payment frequency | Weekly / Fortnightly / 4-Weekly / Monthly / Quarterly |

SYHA USE ONLY

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| --- | --- | --- | --- |
| Direct Debit Information collected by: | NAME | SIGNATURE | DATE |
| Entered on to AccessPay by: | NAME | SIGNATURE | DATE |
| Activated, notice generated and letter printed by: | NAME | SIGNATURE | DATE |

Version 4.5

PLEASE RETURN TO:

SOUTH YORKSHIRE HOUSING ASSOCIATION

152 Rockingham Street

Sheffield

S1 4EB