



CBCSI - Debit Order Form

Property Details:															
Address:															
Personal Details: Please note these details are required for S18A Tax Deduction Certificate															
ID / Passport:													Email:		
Surname:							Cell Phone:								
First Name:							Home Phone:								
Capacity: <i>(Please circle)</i>	Owner Tenant Manager Company Other <i>(Please describe):</i>														
SARS Tax Number							Company reg no								
Debit Order Details:															
Name of Bank:							Branch Code:								
Account Holder: <i>(Name as it appears on your account)</i>							Branch Name:								
Account Number:							Commencement Date:	MM	YYYY	This is the month and year that the first debit order should be deducted					
Debit Order Mode: <i>(Please circle)</i>	Monthly	Annual	Please note that monthly debit orders will be deducted on the 1 st of each month and annual debit orders will be deducted on 1 st Dec each year. These debit orders are subject to annual increases as per below. Please enquire with sarah.meder@cbcsi.org as to the current payment amount.												
Debit Order Terms and Instructions:	I hereby authorise and instruct the Trustees of the Camps Bay and Clifton Safe Community Trust ("The Trust") to debit the above account with the amount of the CBCSI contribution on a monthly / annual basis. * I may cancel this authorisation with 30 days prior written notice to the Trust. * I agree to pay any bank charges relating to this Debit Order instruction. * I agree that the Trustees of The Trust may increase the CBCSI contribution by no more than 7.5% annually * I understand and agree that my personal details will be added to the secure Camps Bay Watch and CBCSI mailing lists and that I may receive crime related and community related information and alerts.														
Signature:															