


MUNICIPAL COUNCIL OF MANZINI		
QUALITY MANAGEMENT SYSTEMS	Doc Ref No.	MCM-QMS-TC-FRM-06
	Revision Status	Issue 01
DEBIT ORDER INSTRUCTION	Revision Date	22.08.2019
	Approved By	Town Clerk



REFERENCE: MZ/

DEBIT ORDER INSTRUCTION

YOUR REF:

NAME OF ACCOUNT HOLDER: _____

ACCOUNT TYPE: _____

ACCOUNT NUMBER: _____

BANK NAME: _____

BANK BRANCH: _____

MONTHLY DEDUCTION: _____

AMOUNT IN WORDS: _____

DATE DEDUCTABLE: _____ **EFFECTIVE DATE:** _____

DATE OF LAST DEDUCTION: _____

NAME OF TOWNSHIP: _____

PROPERTY LOT#: _____

DECLARATION

I _____ hereby agree that the details furnished above are true to the best of my knowledge and commit myself to the terms and conditions of this instrument until and when written communication of alteration to the standing arrangement are notified by both parties.

.....

Applicant's signature

.....

Date