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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: | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |
| Sovereign Network Group  Sovereign House  Basing View  Basingstoke  Hampshire  RG21 4FA | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |
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|  | Service user number | | | | | | | | | | | | | | | | | | |
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| Name(s) of Account Holder(s) | | | | | | | | |  | Reference | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | |  | **Instruction to your Bank or Building Society**  Please pay **PayPoint Re Sovereign Network Grp** 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 **PayPoint Re Sovereign Network Grp** and, if so, details will be passed electronically to my Bank/Building Society. | | | | | | | | | | | | | | | | | | |
| Bank/Building Society account number | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |
| Branch Sort Code | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |
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| 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 | | | | | | | | | | | | | | | | | | | | | | | DDI 2 5/15 | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This guarantee should be detached and retained by the payer. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  | | --- | --- | | 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 **PayPoint Re Sovereign Network Grp** will notify you **5** working days in advance of your account being debited or as otherwise agreed. If you request **PayPoint Re Sovereign Network Grp** 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 **PayPoint Re Sovereign Network Grp** 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 **PayPoint Re Sovereign Network Grp** 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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| For Sovereign Housing Association Ltd Official Use Only:  This information is not part of the instruction to your bank or building society. Please provide your name, address, and preferred payment frequency by ticking the appropriate option | | | | | | | | | |
| 1st of month |  | 2nd of month |  | 15th of month |  | 25th of month |  | 28th of month |  |
| Monday weekly |  | Friday weekly |  |  | | | | | |
| Name |  | | | | | | | | |
| Address |  | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |
| Postcode |  | | | | | | | | |
| Email address | | |  | | | | | | |
| Telephone number | | |  | | | | | | |