

DIRECT DEBIT AUTHORISATION 直接付款授權書

Name of party to be credited (The Beneficiary) 收款之一方(受益人)	Bank No. 銀行編號	Branch No. 分行編號	Account No. to be credited 收款賬戶之號碼
AEON CREDIT SERVICE (ASIA) CO., LTD.	0 0 4	5 7 7	0 0 6 6 3 8 0 0 1

I/We hereby authorise my/our below named Bank to effect transfers from my/our account to that of the below named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below.

I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer or reversal notice has been given to me/us.

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).

I/We understand that I/we must maintain sufficient funds in the account one business day (before the close of branch banking hours) before the transfer date (as specified in the instructions received by my/our Bank from the beneficiary and/or its banker and/or its banker's correspondent from time to time) for the transfer authorised herein. I/We agree that should there be insufficient funds in my/our account to meet any transfer authorised herein, my/our Bank will be entitled, at its absolute discretion, not to effect such a transfer in which event the Bank may levy its usual charge and may cancel this authorisation at any time without notification to me/us. For the avoidance of doubt, the Bank may cancel this authorization at its sole discretion at any time without prior notice.

This direct debit authorisation shall have effect until further notice or until the expiry date written below (whichever shall first occur). I/We agree that if no transaction is performed on my/our account under such authorisation for a continuous period of 30 months, my/our bank reserves the right to cancel the direct debit arrangement without prior notice to me/us, even though the authorisation has not expired or there is no expiry date for the authorisation.

I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect.

本人(等)現授權本人(等)之下述銀行，(根據收款人或其往來銀行及/或代理行不時給予本人(等)銀行之指示)自本人(等)的戶口內轉賬予上述收款人。惟每次轉賬金額不得超過以下指定之限額。

本人(等)同意本人(等)的銀行毋須證實該等轉賬通知或沖銷通知是否已交予本人(等)。

如因該等轉賬而令本人(等)的戶口出現透支(或令現時之透支增加)，本人(等)願共同及各別承擔全部責任。

本人(等)明白本人(等)須在指定的轉賬日期(即根據本人(等)的銀行從收款人或其往來銀行及/或代理行不時收到的指示)前一個營業日(分行辦公時間內)，在戶口內備有足夠款項以便支付該等授權轉賬。本人(等)並同意如本人(等)的戶口並無足夠款項支付該等授權轉賬，本人(等)的銀行有絕對酌情權不予轉賬，且本人(等)銀行可收取慣常的收費，並可隨時取消該等授權轉賬且毋須通知本人(等)。為避免疑問，本人(等)的銀行可隨時自行決定取消該等授權轉賬且毋須通知本人(等)。

本直接授權書將繼續生效直至另行通知為止或直至下列到期日為止(以兩者中最早之日期為準)。本人(等)同意如本人(等)已設立之直接付款授權的戶口連續三十個月內未有根據本授權而作出過賬的紀錄，本人(等)的銀行保留權利取消本直接付款安排而毋須另行通知本人(等)，即使本授權書並未到期或未有註明授權到期日。

本人(等)同意，本人(等)取消或更改本授權書的任何通知，須於取消/更改生效日最少兩個工作天之前交予本人(等)之銀行。

My/Our Bank Name and Branch 本人(等)之銀行及分行名	Bank no. 銀行號碼	Bank no. 分行號碼	My/Our Account No. 本人/吾等之賬戶號碼
My/Our Name as recorded on Statement/Passbook 本人/吾等在月結單/存摺上所紀錄之名稱	My/Our Address as recorded on Statement/Passbook 本人/吾等在月結單/存摺上所紀錄之地址		
Credit Card Account Repayment Method 信用卡還款方法			
<input type="checkbox"/> Full Payment 全數清還	<input type="checkbox"/> Minimum Payment 最低還款額		
My/Our Signature (s) 本人/吾等之簽名	Date 日期	Debtor's Reference (Compulsory Field-See notes Below) 債務人參考(必填之欄-請參閱下列各點) Credit Card No./Agreement No. 信用卡/合約號碼	
X			
Bank Use Only 以下由銀行填寫			

** 銀行にお届けの身分証明書番号が弊社へご登録いただいている香港ID番号と異なる場合はパスポート番号をお書き添えてください。
If the record of your identity document number in the bank is different from the record of AEON, please provide your passport number below.
若閣下於銀行所登記之身份證明文件號碼與AEON所登記之號碼有異，請於下列欄內填(如護照號碼)：

Notes 附註：

- If the amount of your payments are likely to vary each time, set the limit for each payment at the maximum amount you would expect to pay at any one time.
- Please ensure that you sign the form in the usual way that you would sign on your Bank Account.
- In the box marked 'Debtor's Reference enter the identifying reference between yourself and the party to be credited i.e. student number, mortgage agreement number, retail agreement number, etc.
- American Express Credit Card Cardholder, please fill in "0" before card number (eg. 0377-XXXX-XXXX-XXXX).
- The application for Company bank account holder, please stamped the company authorized seal with signature. Then, submit to your company bank directly.
- If bank account holder is not the above AEON credit cardholder, please provide related identification number and full English name of bank account holder.
- The Joint bank account is not applied for Direct Debit Authorization.

- 如台端付款之數額每次可能不同，則請將最高者定為每次付款之最高限額。
- 請保證貴戶在此授權書內之簽名，與銀行賬戶所簽者完全相同。
- 在債務人之參考欄內，請將貴戶與受款一方之關係，略予說明，例如學生編號，抵押合約號碼等。
- 美國運通信用卡客戶，請於填寫信用卡號碼前加上"0" (例如 0377-XXXX-XXXX-XXXX)。
- 如欲憑公司持有之銀行戶口作申請，請於簽署及蓋上公司授權印章後，直接遞交予開戶銀行。
- 若銀行戶口持有人並非上述AEON信用卡客戶，請提供銀行戶口持有人登記之身份證件號碼及英文全名。
- 本公司不接受以銀行聯名戶口用作此直接付款授權(自動轉賬)之申請。

* Delete whichever is not appropriate. 請刪去不適用者