



LIFE INSURANCE

# Direct debit request schedule

Policy number

Policy number

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We respect your privacy and handle your information in accordance with our privacy policy, available on [mlcinsurance.com.au/privacy-policy](http://mlcinsurance.com.au/privacy-policy)

## Section 1: Direct debit request

If you're with one of the smaller banks or a credit union you need to check if they can accept a direct debit request from the Bulk Electronic Clearing System (BECS). This information should be available on your recent bank statement, on the bank's website, or call their customer service number.

I/We,

Surname (company/business name)

Given name(s) (or ABN)

Surname

Given name(s)

request MLC Limited (ABN 90 000 000 402) (AFSL 230694) (User ID No. 534289) to draw money from my/our account with:

Name of financial institution

Name of account holder

Address of financial institution

State

Postcode

BSB

Account number

### Please note:

Direct debiting is not available on the full range of financial institution accounts. If in doubt, please refer to your financial institution before completing this request.

The minimum monthly amount for direct debit is \$10.00.

How frequently will premiums be paid?

☐

Monthly

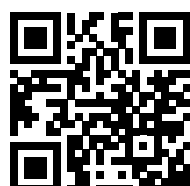
☐

Half yearly

☐

Yearly

Preferred date (DD/MM/YYYY)



### The Trustee

Equity Trustees Superannuation Limited  
ABN 50 055 641 757 AFSL 229757

### The Fund

Smart Future Trust  
ABN 68 964 712 340

### The Insurer

MLC Limited  
ABN 90 000 000 402 AFSL 230694

Insurance is issued by MLC Limited. MLC Limited uses the MLC brand under licence from the Insignia Financial Group. MLC Limited is part of the Nippon Life Insurance Group and is not a part of the Insignia Financial Group.

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## Section 2: Your agreement and declaration

I/We acknowledge that this Direct Debit Request is governed by the terms of the Direct Debit Request Service Agreement and the terms and conditions of the policy(s) to which this application relates. I have read and agree to the terms and conditions.

### Signature of account holder 1

Name

|                                                                                   |                      |                      |                      |                      |                      |
|-----------------------------------------------------------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
|  | Date (DD/MM/YY)      |                      |                      |                      |                      |
|                                                                                   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

### Signature of account holder 2 (if applicable)

Name

|                                                                                   |                      |                      |                      |                      |                      |
|-----------------------------------------------------------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
|  | Date (DD/MM/YY)      |                      |                      |                      |                      |
|                                                                                   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

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### Customer postal address and contact phone number(s)

Unit number

Street number

PO Box

Street name

Suburb

State

Postcode

Country

Home telephone

Mobile phone number

Business telephone

Best contact time

(am/pm)

Email

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## Section 3: Checklist

- ☐ All sections of the form are completed.
- ☐ Agreement and declaration signed and dated.
- ☐ Read and retained a copy of the Direct Debit Request Service Agreement.

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## Section 4: Send us your form

Please return your completed, signed and dated form to:

**MLC Life Insurance - Operations**

**PO Box 23455**

**Docklands VIC 3008**

**Email: [enquiries.retail@mlcinsurance.com.au](mailto:enquiries.retail@mlcinsurance.com.au)**

If you have any questions, please contact your financial adviser or call us on **13 65 25**, 8.30am to 6pm AEST, Monday to Friday.

# Direct Debit Request Service Agreement

## Please retain a copy for your records

This Direct Debit Request ('DDR') Service Agreement is issued by MLC Limited, ABN 90 000 000 402 (User ID no. 534289).

This Service Agreement and the Direct Debit Request Schedule contain the terms and conditions on which you authorise us debit money from your account and the obligations of us and you under this agreement. You should read through the Service Agreement and Schedule carefully to ensure you understand these terms and conditions before signing the Schedule.

You should direct all enquiries about your direct debit to our Customer Service on **13 65 25**.

## Our commitment to you

We will give you at least 30 days' notice in writing if there are changes to the terms of the drawing arrangements.

We will keep the details of your nominated financial institution account confidential, except where provided to our financial institution or as required to conduct direct debits with your financial institution.

Where the due date is not a business day, we will draw from your nominated financial institution account on the business day before or after the due date in accordance with the terms and conditions of our policy(s).

## Your commitment to us

It is your responsibility to:

- ensure your nominated account(s) shown in the Direct Debit Schedule are correct and that your nominated financial institution account can accept direct debits through the Bulk Electronic Clearing System (BECS)
- ensure there are sufficient funds available in the nominated account to meet each drawing on the due date
- advise us if the nominated account is transferred or closed, or the account details change
- arrange an alternate payment method acceptable to us if we cancel the drawing arrangements, and
- ensure that all account holders on the nominated financial institution account sign the DDR Schedule.

## Your rights

You should contact us providing at least 7 days notice if you wish to alter the drawing arrangements. This includes:

- stopping an individual drawing
- deferring a drawing
- suspending future drawings
- altering the Schedule, and
- cancelling the Schedule.

Resolving complaints:

We can usually resolve complaints over the phone. If we can't, or you're not satisfied with the outcome, please write to us.

We'll work to resolve your complaint as soon as possible. For more information, read the Complaint Resolution Guide on [mlc.com.au/info](http://mlc.com.au/info)

## Other information

The details of your drawing arrangements are contained in the DDR Schedule.

We reserve the right to cancel drawing arrangements if drawings are dishonoured by your financial institution.

If your account dishonours, your financial institution may charge you a fee. We will not charge for any dishonours.

Your drawing arrangements are also governed by the terms and conditions of your policy(ies).