

\mathscr{C}	010	800	1216)
\subseteq	sales@	fibresky	link.co.za	

Fibre Sky Link (Pty) Ltd. First Floor, Mac Mac Building Maxwell Office Park

Magwa Crescent Waterfall, Midrand 2195

Debit Order Mandate

Good Day Valued Customer

Thank you for choosing to pay by debit order.

Available debit order dates are 1st 15th 24th and 25th of the month. Kindly note that from the 1st to the 14th you will be debited for that month's services and from the 15th to the last day of the month you will be debited for the next month's services.

A R50 penalty fee will be ch	arge	d for	any	⁄ fail	led a	lebit	ora	ler w	here	e fui	nds	s have	e not been provided for	in y	our	асса	unt.								
A. Authority/Mandat Name of Account Holder:	e: Pa	pei	/El	ect	ron	ic							Address:												F
Bank Account Detai																									
Bank Name:													Branch Name:												
Account Number:											T		Branch Town:												T
Account Type:		Current (cheque) Savings Transmission								Branch Code: Contact Number:															
Date:	D	D	М	М	Y	Υ	Υ	Υ					Amount:	R											_
То:	FI	FIBRESKYLINK								Address:	M M W	First Floor, Mac Mac Building Maxwell Office Park Magwa Crescent Waterfall, Midrand 2195													
Contract Ref No:																									
instructions to your banke mentioned account at my/that the sum of such paymobligations as agreed to in. The individual payment insidelivered on the date whe is due and the amount of differ as agreed to in term. The payment instructions Contract Reference Numb and must be provided to in Contract Reference Numb E before the issuing of any directly after having been in the sum of th	our a nent in the (struct n the each i s of th er, ind dentif er sho	ibovenstru Contions ions obli, indiv ne Ap thor clude by the ould nent	so a gatidua gree be a special	entions was Refined to Landau Para Landau	oned will recent terms t	d bar not co nce N ed n ms o ent in sueo d pa ntra o thi	nk o differ Num nust of th nstr d m ct. T s fo	n co r fro aber. t be i ne Ag uction ust of ent in The s	issue gree on m carry nstru said n see	ed a mer nay i the uction	and nt no e on:	d t	I/we acknowledge that treated by my/our abo been issued by me/ us C. CANCELLATION I/we agree that althoug by me/us, such cancell understand that I/we cwithdrawn from my/ou mandate if such amou D. ASSIGNMENT I/We acknowledge that third party if the Agree party.	ye m pers gh th ation annour aco	nent sona nis a n wil ot re coul were	uthouthouthouthouthouthouthouthouthoutho	ority t car m ar aid) ally c	ank and acel mou in team owin	mar the / nts, erms g to	ndat Agre whice of to you	e m eme th h his	ay bent. ave auth	e ca l/we beer nority	nce also n / an	lle o d
I /we agree that the first pa	/we agree that the first payment instruction will be issued and					Signed	D	D	М	М	Υ	Υ	Υ	Υ											
delivered on(date) and thereafter regularly on the 1									Authorised Signature:																
If, however, the date of the payment instruction falls on a non-						Assited by:																			
processing day (weekend or public holiday) I agree that the payment instruction may be debited against my account on the following business day; or							Capacity																		
Subsequent payment instr terms of this authority unt have been paid or until thi you notice in writing of no	il the s autl	oblig horit	gatio y is	ons i can	in te celle	rms d by	of t / me	he A e/us	gree by g	eme ivin	g		Agreement No.	REN	CE N	NUM	IBER	R							

previous clause) and sent by prepaid registered post or delivered to

your address indicated above.