



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 Tending District Council will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Tending District Council 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 Tending District Council 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 Tending District Council 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.

This guarantee should be detached and retained by the Payer.



Please complete the following questions, then complete the instruction below.

1. Please advise us of the name and address of the person from whose account the Direct Debits will be taken.

Name _____
 Address _____

2. If you are filling in this Direct Debit instruction but it is not your own Council Tax bill that you wish to pay, please tick this box Thank you.

3. Payment to be made (tick one)
 MONTHLY
 (usually 10 per financial year)

OTHER

| | | | |
|--------------------------|---|--------------------------|-------------|
| <input type="checkbox"/> | Monthly on the 1st of each month | <input type="checkbox"/> | Quarterly |
| <input type="checkbox"/> | Monthly on the 8th of each month | <input type="checkbox"/> | Half Yearly |
| <input type="checkbox"/> | Monthly on the 15th of each month | <input type="checkbox"/> | Annually |
| <input type="checkbox"/> | Monthly on the 20th of each month | | |
| <input type="checkbox"/> | Monthly on the 28 th of each month | | |



Please fill in the form and send to:

Tending District Council
 88-90 Pier Avenue
 Clacton on Sea
 Essex CO15 1TN

Originators identification number

| | | | | | |
|---|---|---|---|---|---|
| 6 | 2 | 4 | 4 | 7 | 7 |
|---|---|---|---|---|---|



Instruction to your Bank or Building Society to pay Direct Debits.

1. Name and full postal address of your Bank or Building Society Branch

To: The Manager _____
 _____ Bank or Building Society
 Address _____

 Postcode _____

2. Name(s) of Account holder(s)

3. Branch sort code
 (from the top right hand corner of your cheque)

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4. Bank or Building Society Account number

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5. Council Tax account number (on the bill)

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6. Instruction to your Bank or Building Society.
 Please pay Tending District Council, Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Tending District Council and, if so details will be passed electronically to my Bank/Building Society.

Signature(s) _____

 Date _____

Banks and Building Societies may not accept Direct Debit Instructions for some types of accounts.