直接付款授權書

DIRECT DEBIT AUTHORIZATION



請依次填寫並將此授權書交給貴戶之往來銀行或收款之一方。Please complete and return this form to your banker or to the party to be credited.

收款人名稱(受益人) Name of party to be credited (The Beneficiary)	銀行編號 Bank No.	分行編號 Branch No.	收款賬户號碼 Account No. to be credited	
Community Leap Limited	0 1 6	4 7 8	7 8 3 2 3 8 4 0	3

本人/我們現授權本人/我們之下述銀行,(根據受益人不時給予本人/我們銀行之指示)自本人/我們之賬戶轉賬予上述受益人。惟每次轉賬金額不得超過以下指定之限額。

I/We hereby authorize my/our below named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may received from the beneficiary from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below.

本人/我們同意本人/我們之銀行毋須證實該等轉賬通知是否已交予本人/我們。

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

如因該等轉賬而令本人/我們之賬戶出現透支(或令現時之透支增加),本人/我們願共同及各別承擔全部責任。

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).

本人/我們同意如本人/我們之賬戶並無足夠款項支付該等授權轉賬,本人/我們之銀行有權不予轉賬,且銀行可收取慣常之收費,並可隨時以一星期書面通知取 消本授權書。

I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorization at any time on one week's written notice.

本授權書將繼續生效直至銀行接獲本人/我們另行書面通知,並有合理機會行事,或至下列之到期日為止(以兩者中最早之日期為準)。

This authorization shall have effect until the Bank has received and had reasonable opportunity to act on a further written notice from me/us or until the below written expiry date (whichever shall first occur).

本人/我們同意,本人/我們取消或更改本授權書之任何通知,須於取消/更改生效日最少五個工作天之前交予本人/我們之銀行。

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

腰戸持有人之英文名稱 Name of Account Holder(s) (in English) 本人/我們在結單/存摺上所紀錄之地址 My/Our Address as recorded on Statement/Passbook (債務人名稱(若非賬戸持有人) Name of Debtor (if other than account holder) 毎次/月付款限額(附註一) Limit for Each * Payment/Month (Note 1) 一	本人/我們之銀行及分行之名稱 My/Our Bank Name and Branch	銀行編號 Bank No.	分行編號 Branch No.	本人/我們之賬戶號碼 My/Our Account No.			
情務人名稱(若非賬戸持有人) Name of Debtor (if other than account holder) 毎次/月付款限額(附註一) Limit for Each * Payment/Month (Note 1) 毎次/月付款限額(附註一) 上imit for Each * Payment/Month (Note 1) 毎末記解的指示已清楚,準確及完整地填妥於本表格內才簽署作實。 Please confirm that your instructions have been clearly, accurately and completely set ou in this form before signing it. ● 日本記述 中華 (Note 2) ■ 日本記述 中華 (Note 3) ● 「表示の表示の表示の表示の表示の表示の表示の表示の表示の表示の表示の表示の表示の表							
Debtor's Reference (to be filled by the Beneficiary) (Note 4)	賬戶持有人之英文名稱 Name of Account Holder(s) (in Englis	h) 本人/我們在結單/	/存摺上所紀錄之地址	My/Our Address as recorded on Statement/Passbook			
Please confirm that your instructions have been clearly, accurately and completely set out in this form before signing it. 到期日(附註二)				Beneficiary) (Note 4)			
Please confirm that your instructions have been clearly, accurately and completely set out in this form before signing it. 到期日(附註二)							
以上の	(Note 1) 到期日(附註二) Authorization Expiry Date (Note 2) 填寫日期 Completion Date	Please confirm t	hat your instruction				
銀行専用 For Bank Use Only Attended By Initial the action(s) taken: Approved By		賬戶持有人簽署(F)	付註三) Signature(s)	of Account Holder(s) (Note 3)			
Attended By Initial the action(s) taken: Approved By							
(Mark name & date if different from the attending	Attended By (Signature, Name & Date)		from the attending				

附註 NOTES:

- 1) 如台端付款之數額每次可能不相同,則請將最高者定為每次付款之最高限額。
 - 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.
- 2) 本直接付款授權書將於「到期日」一欄中所填寫之日期自動撤銷。如貴戶意欲本直接付款授權書無限期有效(或直至貴戶予以撤銷為止),則請將該欄留空。
 This Direct Debit Authorization will be cancelled automatically on the date included in the box marked 'Expiry Date'. If you wish the Direct Debit Authorization to have effect indefinitely (or until cancelled by you) please leave box blank.
- 3) 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。
 - Please ensure that you sign the form in the usual way that you would sign on your Bank Account.
- 4) 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。
 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, rental agreement number, etc.

(文義如有歧異,應以英文本為準 The English version shall prevail if there is a discrepancy between the English & Chinese versions)

^{*}請刪去不適用者 Please Delete whichever inapplicable