# 20-20 Fusion Limited

# Instruction to your Bank or Building Society to pay by Direct Debit

**Please fill in the whole form including official use box using a ball point pen and send it to:**

Inca House
Eureka Science Park
Ashford
Kent
TN25 4AB

**Originator's Identification Number**

| 7 | 5 | 3 | 2 | 2 | 8 |
|---|---|---|---|---|---|

FOR 20-20 Fusion Limited OFFICIAL USE ONLY
This is not part of the instruction to your Bank or Building Society.

**Name(s) of Account Holder(s)**

**Bank/Building Society account number**

**Branch Sort Code**

**Name and full postal address of your Bank or Building Society**

To: The Manager — Bank/Building Society

Address

Postcode

**Reference Number**

**Instruction to your Bank or Building Society**
Please pay 20-20 Fusion Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with 20-20 Fusion Limited 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 from some types of account

DDI1

This guarantee should be detached and retained by the Payer.

# The Direct Debit Guarantee

- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change 20-20 Fusion Limited will notify you 15 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by 20-20 Fusion Limited or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.

**To be detached by 20-20 Fusion Ltd before the Direct Debit Instruction is sent to the Bank or Building Society**

| **PAYMENT DATE** | 1st | | 15th | |
|---|---|---|---|---|
| I/We wish to pay monthly on | | | | or just after this date. |
| Please tick your preferred date. | | | | |