



### DIRECT DEBIT AUTHORISATION 直接付款授權書

Please complete and return this form to your banker.

請把已填寫的授權書交給貴戶的往來銀行。

Name of Party to be Credited (The beneficiary) 收款之一方 (受款人)	Bank No. 銀行編號 <b>0 7 1</b>	Branch No. 分行編號	Account Number to be credited 收款戶口之號碼
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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 receive 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/吾等本公司現授權本人/吾等本公司之下述銀行，（根據受款人不時給予本人/吾等本公司之銀行之指示）自本人/吾等本公司之戶口內轉賬予上述受款人，惟每次轉賬金額不得超過以下指定之限額。

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.

本人/吾等本公司同意本人/吾等本公司之銀行毋須證實該等轉賬通知是否已交予本人/吾等本公司。

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).

如因該等轉賬而令本人/吾等本公司之戶口出現透支（或令現時之透支增加），本人/吾等本公司願共同及各別承擔全部責任。

I/We understand that I/we must maintain sufficient funds in the account one business day (before the close of branch banking hours) before the transfer date as specified in the instruction received by my/our Bank from the beneficiary.

本人(等)明白本人(等)須在指定的轉賬日期前一個工作日(分行辦公時間內)，在戶口內備有足夠款項以便支付該等授權轉賬。

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.

本人/吾等本公司同意如本人/吾等本公司之戶口並無足夠款項支付該等授權轉賬，本人/吾等本公司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。

This authorization shall have effect until further notice or until the below written expiry date (whichever shall first occur).

本授權書將繼續生效直至另行通知為止或直至下列到期日為止（以兩者中最早之日期為準）。

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 two working days prior to the date on which such cancellation/variation is to take effect.

本人/吾等本公司同意，本人/吾等本公司取消或更改本授權書之任何通知，須於取消/更改生效日最少兩個工作天之前交本人/吾等本公司之銀行。

My/Our Bank Name and Branch 本人/吾等本公司之銀行及分行名稱	Bank No. 銀行編號 <input type="text"/>	Branch No. 分行編號 <input type="text"/>	My/Our Account No. 本人/吾等本公司之戶口號碼 <input type="text"/>
My/Our Name(s) as recorded on Statement 本人/吾等在月結單上所紀錄之名稱	My/Our Address as recorded on Statement 本人/吾等在月結單上/所紀錄之地址		
Limit for Each payment 每次付款之限額 <b>1</b>	Expiry Date 到期日(DD/MM/YY) <b>2</b> <input type="text"/>		Contact Tel No. 聯絡電話碼
Name of Debtor (if other than account holder) 付款人之名稱 (若非賬戶持有人)	My/Our Signature(s) 本人/吾等本公司之簽名 <b>4</b>		
Debtor's Reference (Compulsory Field) 付款人參考編號 (此欄必須填寫) <b>3</b>	<input type="text"/>		
Date of Completion 填寫日期(DD/MM/YY) <input type="text"/>	Signature Verified	Remarks	
<b>For Bank Use Only</b> 銀行專用			

#### Notes 附註:

- If the amount of your each payment is likely to vary from time to time, please set the limit for each payment at the maximum amount you would expect to pay at any one time. "No Limit" for each payment will be set unless otherwise stated.  
若 貴戶支付之金額可能每次不盡相同者，則請在此格填寫每次支付之最高金額。如沒有填上每次付款限額，限額將會訂為“不設上限”。
- The Direct Debit Authorization will be cancelled automatically on the date indicated in the box marked "Expiry Date"; if you wish the Direct Debit Authorization to have effect indefinitely until further notice, please leave the box blank.  
本授權書將於「到期日」格內所示之日期自動取消；貴戶欲想本授權書持續有效直至另行通知為止，可留空不填此格。
- In the box marked "Debtor Reference", please enter the identifying reference between the payer and the party to be credited.  
於「付款人參考編號」格內填入可鑑定付款人與收款人關係之資料。
- Please ensure that you sign the form in the usual way that you would sign on your Bank Account.  
請保證 貴戶在此授權書內之簽名，與銀行戶口所簽者完相同。

If there is any inconsistency or conflict between the English and Chinese versions, the English version shall prevail for all purposes.  
中、英文文本之文義如有歧異，在任何情況下概以英文文本為準。