



agriculture & rural development

Department: agriculture & rural development PROVINCE OF KWAZULU-NATAL

ENTITY MAINTENANCE FORM

Bank Details

DIRECTOR GENERAL: DEPARTMENT OF AGRICULTURE AND RURAL DEVELOPMENT

I/We hereby request and authorise you to pay any amounts which any accrue to me/us to the credit of my/our account with the mentioned bank.

I/We understand that the credit transfers hereby authorised will be processed by computer through a system know as the "ACB ELECTRONIC FUND TRANSFER SERVICE", and I/We also understand that no additional advice of payment will be provided by my/our bank, but details of each payment will be printed on my/our bank statement or any accompanying voucher.(This does not apply where it is not customary for banks to furnish bank statements).

I/we understand that a payment advice will be supplied by the Department in the normal way, and that it will indicate the date on which funds will be available in my/our account.This authority may be cancelled by me/us

Initials and Surname

Signature of designated signatory

Date dd/mm/yyyy

NAME OF ACCOUNT HOLDER

Name of Bank

Name of Branch

Branch Code

Account Number

Type of Account: Current Account, Other (please specify), Savings Account, Transmission Account

DATE STAMP OF BANK BANK ACCOUNT PARTICULARS CERTIFIED AS CORRECT

ADDRESS TO SEND THE PAYMENT STUB