

直接付款授權書

Direct Debit Authorisation

請用正楷填寫，刪除不適用者*，填妥表格後交回閣下往來銀行。
Please complete in BLOCK LETTERS, delete whichever is not appropriate*, and return the completed form to your banker.

日期(日/月/年)
Date(DD/MM/YY)

甲部 Part A — 收款人資料 Beneficiary Information			
收款之一方名稱(收款人) Name of Party to be Credited (The Beneficiary)		The Maryknoll Medical & Welfare Association Limited	
銀行編號 Bank No.	0 2 4	分行編號 Branch No.	3 7 9
收款賬戶之號碼 Account No. to be credited		2 4 6 4 9 9 0 0 1	

乙部 Part B — 申請人資料 Applicant Information			
本人(等)之銀行及分行名稱 My/Our Bank Name and Branch			
銀行編號 Bank No.	分行編號 Branch No.	本人(等)往來/儲蓄之賬戶號碼* My/Our Current/Savings Account No.*	
本人(等)在結單/存摺上所記錄之名稱 My/Our Name as recorded on Statement/Passbook			
本人(等)在結單/存摺上所記錄之地址 My/Our Address as recorded on Statement/Passbook			
最高付款限額 Maximum Limit for ¹ Each Payment / Each Month*	1每次 / 每月* HKD	2到期日 (日/月/年) ² Expiry Date (DD/MM/YY)	
付款人之姓名(若非賬戶持有人) Name of Debtor (if other than Account Holder)			
³ 支賬參考 (必填之欄) ³ Debtor's Reference (Compulsory Field)			
註 Notes :			
<p>1. 如付款之金額每次可能不相同，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.</p> <p>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。如欲使本直接付款授權書無限期有效(或直至予以撤銷為止)，則請將該欄留空。但該銀行將不受此限，並可將超過兩年未有任何過賬紀錄之直接付款授權宣告失效，及可刪除該授權紀錄而毋須另行通知。 This Direct Debit Authorisation will be cancelled automatically on the date included in the box marked 'Expiry Date'. If you wish the Direct Debit Authorisation to have effect indefinitely (or until cancelled by you), please leave box blank. If there is no transaction being recorded under this direct debit authorisation for over two years, the Bank may delete this direct debit authorisation without giving any notice.</p> <p>3. 在支賬參考欄內，請填上與收款人之辨認參考資料，例如學生編號、抵押合約號碼、租約號碼等。 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.</p>			

丙部 Part C — 聲明 Declaration	
<p>1. 本人(等)現授權上述之銀行(「該銀行」)，根據收款人不時給予該銀行之指示，自本人(等)上述戶口轉賬予收款人。但每次轉賬金額不得超過以上指定之限額。 I/We hereby authorise my/our above-named bank (the "Bank") to effect transfer from my/our above-mentioned account to the above-named Beneficiary in accordance with such instructions as the 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 above.</p> <p>2. 本人(等)同意該銀行毋須證實該等轉賬是否已通知本人(等)。 I/We agree that the Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.</p> <p>3. 本人(等)確證在本授權書內之簽名，與本人(等)上述戶口於該銀行簽署紀錄完全相同。 I/We confirm that my/our signature(s) on this authorisation is/are the same as filed with the Bank for the operation of my/our above-mentioned account to be debited for the transfer.</p> <p>4. 本人(等)同意如本人(等)之上述戶口並沒有足夠款項支付任何授權之轉賬時，該銀行有絕對的情權在(i)未經本人(等)的批准下；或(ii)在未有預先通知本人(等)的情況下，執行有關授權轉賬。如因該等轉賬而令本人(等)之上述戶口出現透支(或令現時之透支增加)，本人(等)會共同及個別承擔全部責任及同意在此情況下，該銀行可向本人(等)收取任何利息及費用(該等利息及費用，由該銀行不時釐定)。 I/We agree that in the event that there is insufficient funds in my/our above-mentioned account to effect any transfer hereby authorised, the Bank may, in its absolute discretion, effect such transfer without (i) seeking prior approval from me / us; or (ii) providing prior notice to me / us. 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), in which event I/we agree that the Bank may charge me / us any interest, cost and expense which may arise as a result of any such transfer (where such interest, cost and expense shall be determined by the Bank from time to time).</p> <p>5. 儘管以上第4段所述，本人(等)同意如本人(等)之上述戶口並沒有足夠款項支付該等授權轉賬時，該銀行有絕對的情權不予執行有關授權轉賬，且該銀行可向本人(等)收取由該銀行不時釐定之費用。本人(等)亦同意，如因本人(等)之上述戶口並沒有足夠款項支付該等授權轉賬而導致的轉賬取消或延誤所引起之一切費用或責任，概由本人(等)自負，與該銀行無涉。 Notwithstanding paragraph 4 above, I/We agree that in the event of insufficient funds in my/our above-mentioned account to effect any payment hereby authorised, the Bank shall be entitled, in its absolute discretion, not to effect such payment in which event the Bank may charge me/us any fees and charges prescribed by the Bank from time to time. I/We also agree that I/we shall be solely responsible for any surcharges or consequences for any delay or failure in making payment which may arise as a result of any such payment not effected due to insufficient funds, and the Bank shall have no liabilities in connection therewith.</p> <p>6. 本人(等)同意取銷或更改本授權書之任何通知，須於取銷或更改生效日最少兩個工作天之前交予該銀行。 I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to the Bank shall be given at least two working days prior to the date on which such cancellation or variation is to take effect.</p> <p>7. 本授權書將繼續生效直至另行通知為止或直至上列到期日為止(以兩者中最早之日期為準)。 This authorisation shall have effect until further notice or until the above given expiry date (whichever first occurs).</p>	

本人(等)之簽名 My/Our Signature(s)
X

註 Note : 文義如有歧異，以英文本為準 In case of discrepancies between the English and Chinese versions, the English version shall apply and prevail.
銀行專用 For Bank Use
Remark :

>>>SD>BOS

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填寫直接付款授權書範例及注意事項

Illustrations and Notes for filling out a Direct Debit Authorisation Form

乙部 Part B – 申請人資料 Applicant Information	
本人(等)之銀行及分行名稱 My/Our Bank Name and Branch	1 Hang Seng Bank Ltd.
銀行編號 Bank No.	2 0 2 4
分行編號 Branch No.	2 2 6 2
本人(等)往來/儲蓄之賬戶號碼* My/Our Current/Savings Account No.*	1 2 9 1 8 2 0 0 1 2
本人(等)在結單/存摺上所記錄之名稱 My/Our Name as recorded on Statement/Passbook	3 Chan Tai Man
本人(等)在結單/存摺上所記錄之地址 My/Our Address as recorded on Statement/Passbook	9/F, 8 Des Voeux Road, Central, HK
最高付款限額 Maximum Limit for ¹ Each Payment / Each Month ¹ 每次 / 每月 港幣 HKD	4 \$100
² 到期日 (日/月/年) ² Expiry Date (DD/MM/YY)	5 2 5 1 2 0 9
付款人之姓名(若非賬戶持有人) Name of Debtor (if other than Account Holder)	6 Chan Siu Man
³ 支賬參考 (必填之欄) ³ Debtor's Reference (Compulsory Field)	7 5 2 5 1 2 0 9

本人(等)之簽名 My/Our Signature(s)

8

X _____

1 本人(等)之銀行及分行名稱 My/Our Bank Name and Branch	閣下之銀行名稱(例如: 恒生銀行) Your Bank name, e.g. Hang Seng Bank Ltd
2 銀行編號 / 分行編號 / 本人(等)往來/儲蓄之賬戶號碼* Bank No. / Branch No. / My/Our Current/Savings Account No.*	請參閱閣下往來戶口月結單 / 儲蓄存摺上之賬戶號碼(包括銀行編號及分行編號) Refer to your bank account statement / Savings passbook (for Bank code No. & Branch code No.)
3 本人(等)在結單/存摺上所記錄之名稱 My/Our Name as recorded on Statement/Passbook	名稱須與閣下銀行紀錄之姓名相同 Name must match with that/those of your bank account
4 最高付款限額 每次 / 每月* Maximum Limit for Each Payment / Each Month*	每次 / 每月*之付款金額上限 (如不適用者, 請留空) Maximum amount for Each Payment / Each Month* (Leave blank if not applicable)
5 到期日 Expiry Date	直接付款授權書之有效到期日 (如不適用者, 請留空) Expiry date of the Direct Debit Authorisation (Leave blank if not applicable)
6 付款人之姓名 Name of Debtor	若付款人並非賬戶持有人, 請填寫此欄 If the funds are paid by a party other than the account holder, please provide the party's name here
7 支賬參考 Debtor's Reference	付款人及收款人互相辨認的參考資料 (請與收款人確認有關詳情) Identifying reference between yourself and the Beneficiary (Please confirm with the Beneficiary for details)
8 本人(等)之簽名 My/Our Signature(s)	簽署須與閣下在此表格上所指示之銀行戶口相同 Signature(s) should match that/those of the bank account stipulated in this form

注意事項 Notes	
1.	本行會收取有關設立直接付款授權指示之服務費用。(詳情請參考“各項銀行服務之收費簡介”) The Bank may impose a service charge for setting up the Direct Debit Authorisation instruction. (Please refer to “Banking Services - Fees and Charges” for details.)
2.	請與收款人確定轉賬日期, 並確保支賬戶口於轉賬日期前一天有足夠之可用結餘; 否則, 本行將會就每項退回之自動轉賬項目收取有關手續費。(詳情請參考“各項銀行服務之收費簡介”) Please confirm the scheduled payment date/value date with the beneficiary, and make sure sufficient funds are available in the debit account for the direct debit one day prior to the scheduled payment date/value date. Otherwise, the Bank will impose a handling service charge for each item returned. (Please refer to “Banking Services - Fees and Charges” for details.)