



DEBIT ORDER MANDATE:

A. Authority

Given by (Name of Account Holder)	_____
Address	_____
Bank	_____
Branch and Code	_____
Account Number	_____
Type of Account	Current (cheque) / Savings / Transmission (Circle Type)
Amount	<u>Amount will vary</u>
Date	<u>Date will vary</u>
To (Name of Beneficiary)	<u>South African National Roads Agency</u>
Abbreviated Name as Registered with the Bank	<u>SANRAL</u>
Beneficiary's Address	<u>48 Tambotie Avenue, Val de Grace, Pretoria, 0184</u>

This signed Authority and Mandate refers to our contract dated _____ ("the Agreement").

I/We hereby authorise the **South African National Roads Agency** to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on _____ and continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing, sent via email to your address indicated below. In this notice, I shall indicate the date this mandate must be cancelled. The date I choose may not be a date in the past.

E-mail: info@sa-etoll.co.za

The individual payment instructions so authorised to be issued must be issued and delivered on the date when the obligation in terms of the Agreement is due.

If however, the date of the payment instruction falls on a non-processing day (weekend or public holiday) I agree that the payment instruction may be debited against my account on the following business day; or Subsequent payment instructions will continue to be delivered in terms of this authority until the obligations in terms of the Agreement have been paid or until this authority is cancelled by me/us by giving you notice in writing (as indicated in the previous clause)

I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that details of each withdrawal will be printed on my bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This number must be added to this form in Section F before the issuing of any payment instruction.



B. Mandate

I/We acknowledge that all payment instructions issued by you shall be treated by my/our above-mentioned Bank as if the instructions have been issued by me/us personally.

C. Cancellation

I/We agree that although this Authority and Mandate may be cancelled by me/us, such cancellation will not cancel the Agreement. I/We shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force if such amounts were legally owing to you.

D. Penalty Fees

I/We understand that I/we are liable for the payment of penalty fees resultant from dishonoured payment transactions, i.e., a debit order that is returned due to a lack of funds.

E. Assignment

I/We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.

Signed at _____ on this _____ day of _____.

(Signature as used for operating on the account)

F. Agreement Reference Number

This Agreement reference number is: SANRAL