

**GARDEN RECYCLING SERVICE PAYMENT FORM**

PLEASE COMPLETE IN CLEAR CAPITALS

**FOR EXISTING CUSTOMERS ONLY**

Please only complete this form if you are an existing Garden Recycling Service customer. Complete the form if you would like to change your payment method to Direct Debit or to change bank account details for an existing Direct Debit.

Customer Name …………………………………………………………………….

Customer Number W………………………………………………………………….

Address …………………………………………………………………….

…………………………………………………………………….

Postcode ………………………Telephone number………...……………

Email …………………………………………………………………………….

|  |  |
| --- | --- |
|  | If you would like to receive your billing information by e mail please tick this box (if this box is left blank your billing information will be posted). |

Please continue to complete and sign the form **overleaf** and return the signed paper copy to us. We are unable to accept an e mailed copy. You will receive an Advanced Notification Letter before the payment is taken.

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| Chichester District Council logo | The Council works hard to take care of your information in  accordance with the General Data Protection Regulations.  For details see:  http://www.chichester.gov.uk/dataprotectionandfreedomofinformation | Direct Debit logo |

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| --- | --- | --- |
| Chichester District Council  Westhampnett Depot  Stane Street  Chichester  West Sussex  PO18 0NS |  | **Instruction to your Bank or Building Society**  Please pay Chichester District Council 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 Chichester District Council and, if so,  details will be passed electronically to my  Bank/Building Society. |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name(s) of Account Holder(s)** |  | **Originator’s Identification Number** | | | | | | | |
|  | 5 | 9 | 9 | 2 | 8 | 5 |  | |
|  | | | | | | | |
|  | **Customer reference number (Office Use Only)** | | | | | | | |
| W |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Bank/Building Society account number** | | | | | | | | |  | **Service Garden Waste** |
|  | |  |  |  |  |  |  |  |  |  |
| **Branch Sort Code** | | | | | | | | |  | **Name and full postal address of your Bank or Building Society** |
|  | |  |  |  |  |  |  |  |  | Bank |
|  | | | | | | | | |  |
| Signature(s) | | | | | | | | |  | Address |
|  | | | | | | | | |  |  |
|  | | | | | | | | |  |  |
|  | | | | | | | | |  |  |
| Date | | | | | | | | |  | Postcode |
|  | | | | | | | | |  |  |
| Please detach and retain for your records ---------------------------------------------------------------- ✂ ----------------------------------------------------------------- | | | | | | | | | | |
| Direct Debit logo | | | | | | | | | |
| **The Direct Debit Guarantee**   * This Guarantee is offered by all Banks and Building Societies that accept instructions to pay Direct Debits. * If the amounts to be paid or the payment dates change, Chichester District Council will notify you, normally ten working days in advance of your account being debited or as otherwise agreed. If you request the organisation to collect a payment, confirmation of the amount and date will be given to you at the time of the request. * If an error is made in the collection of your Direct Debit by Chichester District Council or your Bank or Building Society, you are entitled to a full and immediate refund of the amount paid from your Bank or Building Society. * If you receive a refund you are not entitled to, you must pay it back when the organisation asks you to. * You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Written confirmation may be required, please also notify the organisation.   **This guarantee should be detached and retained by the Payer.** | | | | | | | | | |

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