



## AUTOMATIC DEBIT ARRANGEMENT FOR BANK ACCOUNT

Is this policy previously enrolled in a different bank account?

- Yes, please fill-out section A and B of the form.
- No, please fill-out section A only.

### A. ADA Enrollment Details

Date	Bank Name:	
Customer Name (as it appears in the bank account):	Enrolled Debit Account Number:	Customer Contact Number:
Customer Address:	Government ID Presented Upon Enrollment:	
Merchant Name:	Policy Number (customer reference number):	
Agent Name:	Agent Tel. No:	

### B. ADA Disenrollment Details

To whom it may concern:

This is to request for the disenrollment of \_\_\_\_\_ under the account name  
(account number)  
\_\_\_\_\_ as source of ADA payment for the policy number stated above.  
(account name)

## TERMS AND CONDITIONS FOR ENROLLMENT UNDER AUTOMATIC DEBIT ARRANGEMENT

The undersigned, hereby applies with the Bank Specified Above (Bank) for enrollment under Bank's Automatic Debit Arrangement ("Facility") for the payment of his/its bill via the automatic debiting of the Bank CA/SA Deposit Account as indicated above (the "Enrolled debit account number"). For purposes of effecting payments to the Company/Merchant through the Bank Online System ("the Facility"), the undersigned:

1. Shall abide by the Bank's rules and requirements for maintaining the Enrolled debit account number and agrees to abide by/comply with Bank's rules and requirements for the use of the Facility.
2. Authorizes the Company/Merchant and/or Bank to debit or cause the debiting of the Enrolled debit account number of amounts due to the Company/Merchant from time to time, and thereafter, shall credit the same to the Company/Merchant's account.
3. Authorizes the Company/ Merchant or its agents to know and access such information as may be required or necessary in the implementation of the Facility, such as but not limited to, existence and status of the Enrolled debit account number and reason for debit rejection, if any, which information are or may be covered under R.A. 1405 (The Law on Secrecy of Bank Deposits).
4. Undertakes to ensure that the Enrolled debit account number shall always have sufficient and free funds to cover all amounts due as billed by Company/Merchant. Any discrepancy between the billed amount and the debited amount shall be resolved entirely between the undersigned and Company/Merchant.
5. Acknowledges that billing and other complaints regarding the merchandise and/or services of the Company/Merchant shall be the direct responsibility of Company/Merchant and that Bank shall not, in any manner, have any obligation to the undersigned for matters relating to such complaints.
6. Agrees that his/its enrollment under the Facility shall automatically be deemed withdrawn/terminated at any time Bank is unable to debit the amount due by reason of closure of his/its Enrolled debit account number, insufficiency of funds, garnishment of deposit, or grounds analogous to the foregoing causes. The undersigned, on the other hand, may terminate his/its enrollment in the Facility by submitting a written notice of termination/cancellation to Bank. The undersigned further agrees that in case his/its enrollment in the Facility is cancelled/terminated, his/its enrollment may only be reinstated upon the approval of Company/Merchant subject to the same terms and conditions for new enrollees.
7. (For Corporate Customers) Represents and warrants that: (a) All appropriate and necessary corporate and legal action has been taken by it to authorize the execution, delivery and performance of these terms and conditions and of the specific agreements to which it is a party; and (b) These terms and conditions and such specific agreements to which it is a party constitute, and when executed and delivered pursuant to these terms and conditions will constitute, its legal, valid and binding obligations, enforceable in accordance with their respective term. There is no provision in its Articles of Incorporation, By - Laws or other constitutive documents of the undersigned, and no provision of any indenture or agreement to which it is a party or by which it or any of its property is bound, nor is there any statute, rule or regulation, or any judgment, decree or order of any court or agency applicable to it, which would be contravened by the execution and delivery of these terms and conditions or the specific agreements to which it is a party or by the performance of any provision, condition, covenant, or other term hereof or thereof.
8. (For Individual Customers) For joint accounts, it is hereby understood and agreed that all transactions to be made by any of the undersigned in connection with the Facility are done with the full knowledge and consent of the undersigned's co-depositor/s.
7. Agrees that enrolled account is not a joint account or corporate account, furthermore declared account must not be closed, dormant and invalid.
8. Recognizes that the use of the Facility will expedite payments of the obligations of the undersigned to the Company/Merchant and is for the benefit of the undersigned and that of the Company/Merchant.
9. Holds Bank free and harmless and indemnified from any and all damages, liabilities, suits or causes of action arising from the implementation/operation of the Facility, fortuitous events and any interruption, suspension or discontinuance of the Facility due to technical or mechanical causes and/or errors.

I/ We have read and agree to the ADA terms and conditions printed on this form. I/We declare that the above-mentioned information are accurate to my knowledge.

\_\_\_\_\_  
Customer Signature over Printed Name

FOR BANK'S USE ONLY	
Encoded/Verified By:	Approved By: