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Please fill in the whole form including official use box using a ball



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Instruction to your bank or building society to pay by Direct Debit

bint pen and send it to:	Service	user n	umber		1		7
Evinox Ltd	8	3	9	7	4	2	
Unit 37, Barwell Business Park Leatherhead Road							
Chessington		Plose	e comp	loto the	roquir	od info	mation below
Surrey	Please complete the required information below This is not part of the instruction to your bank or building society						
KT9 2NY	Apart Addre	ess:	ame: umber:				
ame(s) of account holder(s)	Post 0	Code:					
	Please tick the number of bedrooms in your property:						our property:
	1 Bed	□ £4	5 2	Bed 🗌	£50	3 Bec	d 🗆 £60
ank/building society account number			TE: thes ur actua			e just g	uidelines and migh
	□ 1 st		our pre th 1 1 amount	5 th] 21 st		: ate each month.
ame and full postal address of your bank or building society To: The Manager Bank/building society	Instructi Guarant	oay Evir on subje ee. I un	ox Ltd D ect to the derstand	irect De safegua that this	bits from ards ass s Instruc	n the acc ured by t tion may	count detailed in this the Direct Debit r remain with Evinox L my bank/building
lddress	Signatur	e(s)					
Postcode	Date	1	1				
eference (Please include your Apartment Name & No. in the reference below)		-	-				
	_						
Banks and building societies may not accept Dire	ect Debit Ir	structio	ns for so	me type	s of acc	ount	
This guarantee should be detac			y ne pa	yeı.			

