Please fill in the whole form including official use box using a black pen and send it to:

Exchequer Department Tunbridge Wells Borough Council Town Hall Royal Tunbridge Wells Kent TN1 1RS

Name(s) of Account Holder(s)

Addre	SS									
	Postcode									
Bank/	buildir	ng soc	iety a	ccoun	t num	ber				
Bank	Sort C	ode				_		-		
Name	and fu	ull pos	tal ad	dress	of you	r banl	k or bu	ilding s	societ	
To: The Manager							Bank/bı	uilding s	ociety	
Addre	ss									

Reference number (your customer number from your invoice)

С

R

Е

F

Postcode

DIRECT



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

Service user number



This section is for TUNBRIDGE WELLS BOROUGH COUNCIL'S OFFICIAL USE ONLY. This is not part of the instruction to your bank or building society.

The amounts will be debited on or about the 15th of the month.

Instruction to your bank or building society

Please pay Tunbridge Wells Borough 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 Tunbridge Wells Borough Council and, if so, details will be passed electronically to my bank/building society.

Signature(s)
Date

Banks and building societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

