

To: The Chief Financial Officer

DEBIT ORDER INSTRUCTION
Mangosuthu University Technology
PO Box 12363
Jacobs
40256

FOR ACTION ON THE _____ OF EVERY MONTH.

Dear Sir,

UNIVERSITY FEES FOR:

Student Name and Surname: _____

Student Identity Number: _____ **Student Registration No.:** _____

I, _____ **ID:** _____ **Relationship:** _____,

the surety holder for the above student hereby request, instruct and authorise you to draw against my account with the below mentioned bank, the sum of R _____

(_____ Rand) being the amount

necessary for the monthly payment of university fees in respect of the above student on the date as stipulated above, or the preceding day if it falls on a week-end, commencing on _____ 2025 and continuing until _____ 2025, or until the full account is up to date.

All such withdrawals from my bank account by you shall be treated as though I have signed them personally. Receipt of this instruction by you shall be regarded as receipt thereof by the bank.

Failure to honor this legal and binding acknowledgement of debit order will impede the registration process due to non-payment and may lead to the surety holder and student above 21 years to be listed on the credit bureau.

SIGNATURE OF SURETY/PARENT/GUARDIAN _____ **Date:** _____

The details of my bank account are as follows:

Name of Bank account holder		
Name of bank		
Brand)	Name:	Branch Code:
Account number		
Type of account	Cheque / Savings / Transmission	
Signature of bank account holder as signed on cheques / documents	Date: _____	
Monthly / Weekly / Forth-Nightly		

Attach letter from bank confirming account details or the first page of bank statement **(not more than one month old)** to confirm bank account details of the bank account above.