



Instruction to your Bank or Building Society to pay Direct Debits for HSF health plan



Originator's Identification Number

Originator's Identification Policy Reference Number

9 4 1 1 4 1

Please complete parts 1 to 4 to instruct your bank to take payments directly from your account. Then return the form to: **HSF health plan, FREEPOST RTHJ-GHRG-YKLE, London SE1 9PD**

Please tick your preferred date: 5th 20th Also tick your preferred period: Monthly Quarterly 6 Monthly Annually This is not part of your instruction to your bank

1. Please print the name and full postal address of your bank/building society and branch.

2. Please print the name(s) of the account holder(s).

3. Sort Code

Account Number

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Banks may refuse to accept instructions to pay direct debits from some types of account.

4. Your instructions to the bank/building society and signature:


Please pay HSF health plan 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 HSF health plan and, if so, details will be passed electronically to my bank/building society.

Full name	Date
Email <input type="text"/>	

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.

The Direct Debit Guarantee

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit HSF health plan will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request HSF health plan 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 payment of your Direct Debit, by HSF health plan 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 HSF health plan asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



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