

## Debt Recovery Instruction Form

\* please print clearly

### Your Details

*(if you're an existing client individual/company/partnership name is only required)*

Contact Name	First Name:	Last Name:	
Company Trading Name: <i>(if applicable)</i>			
Postal Address:			
Ph:	Mob:	Fax:	Email:
Bank Account Details:	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <p><i>(only complete if you're a new client)</i></p>		
<p>I understand that Aorangi Debt Collection receives commission on any monies collected whether the debtor pays to Aorangi Debt Collection to ourselves, including whether the debtor is taken to the Dispute Tribunal or the District Court. Payment is due on or before the 20th day of the month following date of invoice. Any defaults on payments to Aorangi Debt Collection will result in legal action to recover the amounts outstanding including cost of collection. (All costs are exclusive of GST).</p>			

### Debtor's Details

*(please start recovery action on)*

<input type="checkbox"/> Personal	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company
Debtor's Name	First Name:	Last Name:
Company/Partnership Trading Name: <i>(legal entity)</i>		
Last Known Postal Address:		
Last Known Physical Address:		
Ph:	Mob:	Fax: Email:
Joint Debtor(s)	Name(s): _____	
	Name(s): _____	
Is there a personal guarantee held:	<input type="checkbox"/> Yes <i>(if yes, attach details)</i>	<input type="checkbox"/> No
Immediate default list:	<input type="checkbox"/> Yes	Date of Birth: _____
Amount of Debt: \$	Date Debt Incurred: _____	
Is there an agreement to pay collection costs:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>** (refer below)</i>		
Description of Debt (or attach invoice):		

Please Fax, Post or Email this form to: Unit 4 / 31 Tyne Street, Riccarton  
 PO Box 42 143, Tower Junction, Christchurch  
 Fax 03 343 0050 Email admin@aorangi-debt.com

**\*\* Costs can only be added to the debt if the customer was advised at the time of incurring the debt that should default occur, costs would be added to cover collection costs. To enforce this they must have completed a credit application form or a hire purchase contract. Alternatively you must have a sign prominently displayed in your reception area and they must have been made aware of this.**