

All Members
Melville Security Initiative

Our Ref:
5096/GERnest

Date:
12 September 2016

E-mail:
Gereldine.Ernest@midcity.co.za

MidCity Square
501 Jorissen Street, Sunnyside East, Pretoria
Tel: 0861 MIDCITY or +27 (12) 426 3400

Head Office
PO Box 4945, Pretoria, 0001
midcity@midcity.co.za

MidCity Titles
PO Box 28951, Sunnyside, 0132
Fax: +27 (86) 681 3694
titles@midcity.co.za

www.midcity.co.za

Dear Member,

MELVILLE SECURITY INITIATIVE (MSI) – REQUEST TO RENEW DEBIT ORDERS

We refer to the letter sent to you by Johnlee Admin regarding the Amalgamation of Johnlee Admin and MidCity Property Services, as well as the Welcome Letter sent out to the members by MidCity Property Services on 8 December 2015 as well as 25 January 2016

As the majority of members pay their contributions via debit orders, MidCity has been approach by FNB to inform that we would not be allowed to continue making use of the existing debit orders that were initially implemented by Johnlee Admin. MidCity has been informed, by FNB, that all existing debit orders as signed with Johnlee Admin will be cancelled within 20 days from today. In order to correct the matter MidCity would kindly like to request that you complete the attached debit order form and return it to your MSI Administrator at MidCity (Gereldine Ernest at Gereldine.Ernest@midcity.co.za) by no later than Tuesday, 15 September 2016 by 12:00. Due to the urgency of this matter MidCity will be contacting all owners who have not responded to this letter by the aforementioned date.

We sincerely apologize for the inconvenience caused but wish to confirm that this matter is out of our control.

The various payment methods for the security payments are:

- Debit Order payment method (preferred). Please see attached to this letter a Debit Order form.
- Direct deposit payment method
- Internet-banking payment method
- Stop Order payment method

If you have any problem with regards to the payment of your contributions, please do not hesitate to contact our offices.

On behalf of the Directors of Melville Security Initiative.

Yours sincerely,

Gereldine Ernest
Administrator

(This is an electronic letter and therefore unsigned)



BANKERS DEBIT ORDER

MIDCITY LEVY ACCOUNT REFERENCE NO: _____

PROPERTY NAME:

Melville Security Initiative

FULL NAME/S OF REGISTERED OWNER/S: _____

POSTAL ADDRESS: _____

POSTAL CODE: _____ E-MAIL ADDRESS: _____

TELEPHONE: (T) _____ (CELL) _____

I/We hereby request MidCity Property Services (Pty) Ltd (abbreviated name registered with the bank: **MidCity**) or its nominee to draw against my/our account at whichever bank it may be at present the amount of:

R _____ being the total amount outstanding on my account and increases thereof due in respect of my agreement dated _____ and I/We request my/our bank, whichever it is or will be, to debit my/our account with such amounts drawn against it by **MidCity** in terms of the request. Please debit my Bank Account as shown below, the first payment due on the 1st day of _____ 20_____ and then on the 1st working day of each calendar month thereafter.

BANK: _____ BRANCH NAME: _____

BRANCH CODE: _____ ACCOUNT NUMBER: _____

 ACCOUNT TYPE: *Please mark applicable block below.*

CHEQUE	SAVINGS	TRANSMISSION
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Name of account should it differ from owner: _____

Should a company be the subscriber, the full name of the company must be shown and the authorised person(s) must sign indicating his/their capacity (ties). The company stamp must also appear here.

PLEASE TAKE SPECIAL NOTE:

- IN CASE OF A DEBIT ORDER BEING REJECTED A R104.00 FEE WILL BE CHARGED. (*Fee is subject to change*)
- SHOULD A DEBIT ORDER BE REJECTED TWICE, THE DEBIT ORDER AUTHORITY WILL BE CANCELLED IMMEDIATELY AND SUCH CANCELLATION WILL NOT CANCEL THE OBLIGATION TO PAY LEVIES.
- **This Debit Order will immediately be cancelled upon receipt of notification of change in ownership from your conveyancer.**

All such withdrawals shall be treated as though I/we had signed them personally. I/we understand that the withdrawals from my/our bank account will be processed through a computerised system provided by the South African Banks and I/we also understand that details of each withdrawal will be printed on my/our bank statement or on any accompanying voucher. I/we agree to pay any bank charges to the Debit Order Instruction. In the event of the debit order being rejected by the bank twice, I/we note the special notice of **MidCity's** obligation to cancel this instruction and hereby give them permission thereto. I/we understand that I/we shall not be entitled to any refund of amounts, which have been withdrawn while this authority was in force if such amounts were legally owed. I / We acknowledge that although this Authority and Mandate may be cancelled by me/us by giving 30 days' notice in writing and sent by prepaid post, such cancellation will not cancel the Agreement. I/we acknowledge that this authority may be ceded or assigned to a third party if the management of the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the management of the Agreement, this Authority and Mandate cannot be assigned to any third party.

NOTE: A CANCELLED OR USED CHEQUE, OR A COPY OF YOUR BANK STATEMENT OR TRANSMISSION/SAVING ACCOUNT SHOULD ACCOMPANY THIS FORM FOR BANK IDENTIFICATION PURPOSES.

Signed at _____ on this _____ day of _____ 20_____

 Signature _____ Assisted by _____
 (as used for signing cheques/withdrawals)

Capacity _____

A second signature will be required for joint accounts or when a legal guardian assists a minor