

# Easy Payment Plan™

WHEN COMPLETED, FAX TO YOUR BRANCH FOR APPROVAL  
ELGAS WILL AIM TO PROVIDE AN ANSWER WITHIN 24 HOURS OF RECEIPT

## CUSTOMER INFORMATION

PERSON 1 - MR / MRS / MS: \_\_\_\_\_ PERSON 2 - MR / MRS / MS: \_\_\_\_\_

CUSTOMER ADDRESS: \_\_\_\_\_

\_\_\_\_\_ SUBURB: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

PHONE (H): \_\_\_\_\_ MOBILE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_ SUBURB: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

## ESSENTIAL INFORMATION - ALL FIELDS TO BE COMPLETED IF JOINT ACCOUNT ARRANGEMENT

DRIVER'S LICENCE NUMBER (PERSON 1): \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

DRIVER'S LICENCE NUMBER (PERSON 2): \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

CUSTOMER NUMBER (IF CURRENT CUSTOMER): \_\_\_\_\_

## ELGAS BRANCH INFORMATION

BRANCH NAME: \_\_\_\_\_

BRANCH ADDRESS: \_\_\_\_\_

BRANCH FAX: \_\_\_\_\_ BRANCH PHONE: \_\_\_\_\_

OFFICE USE ONLY

CREDIT APPROVED:  YES  NO

### APPROVAL INFORMATION

CREDIT CHECK AUTHORITY NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

## APPLICATION TO JOIN EASY PAYMENT PLAN™

**Terms & Conditions:** 1. This offer is limited to Elgas domestic customers who receive their LPG supply directly from Elgas, not from an Elgas distributor. 2. The purchase must include an LPG appliance and installation or a packaged, fully installed deal to be eligible for the easy Payment Plan. 3. Cooking Appliances (Cooking appliances are available on Easy Payment Plan if bundled with the purchase of a heating appliance with a recommended retail price of greater than \$500 or an eligible hot water appliance), BBQs, solar hot water appliances and incidental items are not eligible for interest free terms. 4. EPP offer available on minimum purchase of \$500 on agreed appliances only. 5. To be eligible for this offer, customers must pass a credit Appraisal. 6. For the customer's application to be complete, the customer must pay a minimum deposit of \$150 or 10% of the purchase price whichever is greater, and select one of the offered direct payment methods. 7. Customers can choose a payment period of up to 12 months interest free. 24 month interest free (maximum) may apply on specific promotions.

I/We apply to Elgas Ltd (Elgas) for the Credit Amount for the supply of the items herein by Elgas to me/us at the delivery address.

Elgas may decline my/our application in its absolute discretion. If Elgas accepts my/our application (for example by delivery of the items herein to the delivery address), I/we agree to comply with the terms and conditions on my/our part herein and overleaf. I/we agree to the supply of those items and shall pay the Credit Amount to Elgas by instalments in accordance with the Easy Payment Plan details herein. I/We shall immediately pay to Elgas the entire unpaid balance of the Credit Amount if: I/we fail to pay to Elgas any money payable by me/us to Elgas, or if I/we cease to reside at the delivery address, or if I/we cease to purchase LPG from Elgas, or if I/we cease to hire LPG cylinder equipment from Elgas. The supply of LPG and hire of cylinders by Elgas to me/us is in accordance with the Elgas Plain English LPG Supply Conditions.

## USE DISCLOSURE AND OBTAINING OF MY/OUR INFORMATION FOR CREDIT RELATED PURPOSES

The purposes of my/our disclosure of my/our personal information to Elgas are for assessing whether to provide me/us with LPG and LPG related goods and services on credit and ongoing management of my/our account with Elgas and as herein. Elgas may give a credit reporting agency certain information about me/us, including: information in this application; information about payments from me/us that are overdue for more than 60 days, and which Elgas is trying to recover; information about cheques drawn by me that may have been dishonoured at least twice; a serious credit infringement by me/us. Elgas may: obtain credit reports from a credit reporting agency containing personal credit information about me/us and information about my/our commercial credit activities, which may be used for assessing my/our application to Elgas for credit and the collection of any overdue moneys due by me/us to Elgas; give to or obtain from any other credit provider named in my/our application, or in a credit report obtained from a credit reporting agency, any information about my/our personal and commercial credit arrangements, including information that has a bearing on my/our credit worthiness, credit standing, credit history or credit capacity. My/our personal information collected by Elgas: is to be kept secure, and subject to the following, is accessible to authorised Elgas personnel only; may be disclosed to third parties to whom Elgas contracts out specialised functions associated with the supply of LPG or LPG related goods (eg delivery contractors, distributors, IT systems support or mailing houses), for which those third parties shall be required to comply with the National Privacy Principles. Otherwise, Elgas will only disclose personal information if I/we consent, or if this is required by law or otherwise permitted under the Privacy Act. The customer or Applicant has rights of access to, and correction of, their personal information held by Elgas. The Customer confirms that the above Privacy clause has been read and understood. If I/we choose not to disclose my/our personal information to Elgas, Elgas may not be able to provide me/us with LPG and LPG related goods.

CUSTOMER (OR CUSTOMERS') SIGNATURE/S: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

CUSTOMER (OR CUSTOMERS') SIGNATURE/S: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# Easy Payment Plan™

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## CREDIT AMOUNT FOR APPLIANCE, INSTALLATION, INITIAL FILL OF LPG ETC

I/WE APPLY TO ELGAS FOR THE CREDIT AMOUNT FOR THE SUPPLY OF THE FOLLOWING ITEMS BY ELGAS TO ME/US:

(AMOUNTS STATED BELOW SHOULD INCLUDE ANY APPLICABLE GST)

APPLIANCE MODEL/S: \_\_\_\_\_ \$ \_\_\_\_\_

INSTALLATION COST OF APPLIANCE ETC: \_\_\_\_\_ \$ \_\_\_\_\_

INITIAL DELIVERY OF LPG: \_\_\_\_\_ \$ \_\_\_\_\_

CYLINDER FACILITY FEE FOR MONTHS: \_\_\_\_\_ \$ \_\_\_\_\_

LESS DEPOSIT: \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL AMOUNT FOR PAYMENT PLAN (CREDIT AMOUNT): \_\_\_\_\_ \$ \_\_\_\_\_

NOTE THAT SUPPLIES OF LPG AFTER ANY INITIAL LPG DELIVERY PAID FOR AS PROPOSED ABOVE, ARE PAYABLE SEPARATELY TO ELGAS.

## EASY PAYMENT PLAN™ DETAILS (STANDARD 12 MONTHS\*)

I/WE AGREE TO PAY TO ELGAS THE CREDIT AMOUNT OF \$ \_\_\_\_\_, BY \_\_\_\_\_ MONTHLY INSTALMENTS OF \$ \_\_\_\_\_ EACH,  
BY THE PAYMENT METHOD BELOW, COMMENCING ON THE DELIVERY OF THE ITEMS.

\*UNLESS SPECIFIED OTHERWISE

## PAYMENT METHOD (CHOOSE ONE ONLY & FILL OUT THE RELEVANT FORM ANNEXED)

**DIRECT CHARGE APPLICATION** (A REQUEST FOR CHARGING TO CREDIT CARD ACCOUNTS. MASTERCARD, VISA ONLY)

**DIRECT DEBIT APPLICATION** (A REQUEST FOR DEBITING TO ACCOUNTS BY THE DIRECT DEBIT SYSTEM) (FORM DDR)

I/We request Elgas (User ID No 012467) until further notice in writing, to debit my/our account described in the account details above, any amount which is due for payment through the Bulk Electronic Clearing System (CS2). I/We understand and acknowledge that: The Financial Institution may in its absolute discretion determine the order of priority of payment by it or any moneys pursuant to this request or any other authority or mandate. The Financial Institution may in its absolute discretion at any time by notice in writing to the applicant/s terminate this request as to future debits. Elgas may, by prior arrangement and advice to the applicant/s, vary the amount and/or frequency of future debits. I/We accept Elgas Direct Debit Service Agreement (copy available online on [www.elgas.co.nz](http://www.elgas.co.nz) or mailed upon request on 0800 435 427).

CUSTOMER (OR CUSTOMERS') SIGNATURE/S: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

CUSTOMER (OR CUSTOMERS') SIGNATURE/S: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



Elgas Limited,  
PO Box 22-285 Christchurch 8142  
Ph 0800 4 35427

Elgas Customer A/C No (10 digits):

Customer Surname/Company Name:

**BANK INSTRUCTIONS**

NAME:  
(Of Bank Account)

**AUTHORITY TO ACCEPT  
DIRECT DEBITS**  
(Not to operate as an  
assignment or agreement)

**BANK ACCOUNT FROM WHICH PAYMENTS TO BE MADE:**

Bank	Branch	Account Number	Suffix
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(Please attach an encoded deposit slip to ensure your number is loaded correctly)

To: The Bank Manager,

**AUTHORISATION CODE**

0	3	3	2	2	1	5
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BANK:	
BRANCH:	
TOWN/CITY:	

I/We authorise you until further notice, to debit my/our account with all amounts which

**ELGAS LIMITED**

(hereinafter referred to as the Initiator)

**INFORMATION TO APPEAR ON MY/OUR BANK STATEMENT:**

PAYER PARTICULARS										PAYER CODE										PAYER REFERENCE									
E	L	G	A	S																									

YOUR SIGNATURE(S)

DATE: / /

Approved <b>3221</b> 10 14	For Bank Use Only Original - Retain at Branch Date Received: Recorded by: Checked by:	BANK STAMP
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**CONDITIONS OF THIS INSTRUCTION TO ACCEPT DIRECT DEBITS**

- 1) The Initiator:
    - a) Will not initiate a Direct Debit on my/our account unless authorisation is received from me/us in accordance with the terms and conditions agreed between me/us and the Initiator of each amount to be debited from my/our account.
    - b) Has agreed to send notice of the net amount of each Direct Debit and the due date of debiting after receiving authorisation from me/us under clause 1(a) but no later than the date the Direct Debit will be initiated. This notice must be provided in writing (including by electronic means and SMS where I/we have provided prior written consent (including by electronic means and SMS) to communicate electronically).  
The notice will include the following message:  
"The amount \$..... was directly debited to your Bank account on (initiating date)."
  - OR
  - a) Has agreed to give written advance notice to the Acceptor of the net amount of each Direct Debit and the due date of the debiting at least 10 calendar days before (but not more than 2 calendar months) the date when the Direct Debit will be initiated. This advance notice must be provided either:
    - (i) in writing; or
    - (ii) by electronic mail where the Customer has provided prior written consent to the Initiator. The advance notice will include the following message:  
"Unless advice to the contrary is received from you by (date), the amount of \$....., will be direct debited to your Bank account on (initiating date)."  
\* This date will be at least two (2) days prior to the initiating date to allow for amendment of Direct Debits.
  - b) May, upon the relationship which gave rise to this Instruction being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Instruction. Upon receipt of such notice the Bank may terminate this Instruction as to future payments by notice in writing to me/us.
  - c) May, upon receiving written notice (dated after the date of this Instruction) from a bank to which I/we have transferred my/our account, initiate Direct Debits in reliance of that written notice and this Instruction from the account identified in the written notice.
- 2) The Customer may:
    - a) At any time, terminate this Instruction as to future payments by giving notice of termination to the Bank and to the Initiator by the means agreed by the Customer, Bank and Initiator.
    - b) Stop payment of any Direct Debit to be initiated under this Instruction by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank.
    - c) Where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of clause 1(a) above, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal of alteration of Direct Debit back to the Initiator through the Initiator's Bank, PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.
    - d) Request the Bank to reverse any Direct Debits initiated by the Initiator under the Instructions by debiting the amount of the Direct Debits back to the Initiator through the Initiator's Bank where the Initiator cannot produce a copy of the Instructions and/or Confirmation to me/us that I/we are reasonably satisfied demonstrate that I/we have authorised my/our bank to accept Direct Debits from the Initiator against my/our account PROVIDED the request is made not more than 9 months from the date when the first Direct Debit was debited to my/our account by the Initiator under the Instructions.
  - 3) The Customer acknowledges that:
    - a) This Instruction will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Instruction until actual notice of such event is received by the Bank.
    - b) In any event this Instruction is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
    - c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Instruction. Any other dispute lies between me/us and the Initiator.
    - d) Where the Bank has used reasonable care and skill in acting in accordance with this Instruction, the Bank accepts no responsibility or liability in respect of:
      - The accuracy of information about Direct Debits on Bank statements; and
      - Any variations between notices given by the Initiator and the amounts of Direct Debit.
    - e) The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give notice in accordance with 1(a), nor for the non-receipt, or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.
  - 4) The Bank may:
    - a) In its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this or any other Instruction, cheque or draft properly signed by me/us and given to or drawn on the Bank.
    - b) At any time terminate this Instruction as to future payments by notice in writing to me/us.
    - c) Charge its current fees for this service in force from time-to-time.

These terms and conditions are Payments NZ Limited approved and are non-negotiable.



21 Epsom Rd, Sockburn, PO Box 22-285, Christchurch 8142. Ph: 0800 435 427 (0800 4 ELGAS)

## Automatic Card Billing Authorisation Form

### Credit Cards

Upon approval, we will then automatically bill your Visa / Master card for amounts due and your total charges will appear on your Visa / Master card statement.

You may cancel this automatic billing authorisation at any time by writing to us at Elgas, PO Box 22-285, Christchurch 8142.

Customer / Company name:

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Your Elgas customer number:

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Billing address for Visa / Master card:

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Suburb, City, Postal Code:

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Contact Phone Number (s):

e-mail address (if available):

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Name on Visa / Master card: (exactly as printed):

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Credit card number:

---

Card type (Circle one):

Visa

Mastercard

Expiry Date:

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I/We accept Elgas Automatic card billing Authorisation Terms & Conditions attached.\*

\*I authorise Elgas Ltd. to automatically bill my Visa / Mastercard listed above.

Authorisation Signature:

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## Elgas Automatic Card Billing Authorisation Terms & Conditions

1. By requesting for automatic card billing, you authorise your financial institution and Elgas to charge all amounts payable in relation to your Elgas account to the nominated credit card.
2. By selecting “Monthly” cycle, you authorise Elgas to debit the balance due in your Elgas account on 20th of every month or later.
3. Elgas will provide you a notification of the amount that will be recovered from your Credit Card prior to each scheduled transaction date.
4. We'll require your card type, card number and the cardholder's name to validate details with your card provider prior to the commencement of your automatic card billing facility.
5. Should your credit card details change, please let us know at least 3 business days prior to when your automatic payment falls due. Failure to do so may result in payment dishonor; and a dishonour fee may apply.
6. You must ensure that you have sufficient funds in your credit card to honour the payment. If there are insufficient funds, a dishonour fee may apply. This may also affect the continued supply of product.
7. If you have a dispute regarding this payment arrangement or want to alter or cancel this arrangement, or want to dispute, stop or defer a specific automatic payment, please contact Elgas at least 3 business days prior to when your automatic payment falls due.  
If you do not contact us, the payment will be made from your credit card. You may raise a dispute in relation to the payment once it is paid. However, you may not have access to those funds during the resolution of the dispute.
8. We may cancel this payment arrangement at any time. This may occur, for example, in the instance of dishonoured or rejected payments, or if we reasonably consider that fraudulent information has been provided in relation to your payment arrangement. In such an event, you may be notified and an alternative method of payment will then need to be arranged.
9. The personal information requested is required to set up your automatic card billing arrangement. Failure to provide the information will mean Elgas is unable to complete your request. Your personal information will be handled in accordance with our Privacy Policy or otherwise as required by law. A copy of our privacy policy can be found on our website [www.elgas.co.nz](http://www.elgas.co.nz)
10. We may change any of the terms of this agreement;
  - 10.1. If the change will benefit you or is of neutral impact on you, we can make the change immediately and are not required to notify you.
  - 10.2. If the change is required by law, or it is necessary for security reasons, to prevent fraud or for technical reasons (these are called “urgent changes”), we can make this change as soon as possible, but we will try to give you 3 days prior notice of the change. Sometimes, due to the nature of the change, we may not be able to give you 3 days prior notice but we will give you as much notice as we reasonably can.
  - 10.3. If we reasonably consider that the change will have a major negative impact on the majority of our customers using this payment arrangement, and the change is not an urgent change as described above, we will give you at least 30 days prior notice of the change.
  - 10.4. If we reasonably consider that the change will not have a major negative impact on the majority of our customers using this payment arrangement, and the change is not an urgent change as described above, we will give you at least 14 days prior notice of the change.
11. All correspondence relating to this payment arrangement will be forwarded to the address of the Elgas account holder. Information you provide to us will be dealt with in accordance with applicable laws and the Elgas Privacy Policy as amended from time to time. Elgas may use and/or disclose your information to your Financial Institution in order to process payments and to investigate any possible incorrect payment.

**0800 435 427**  
**(0800 4 ELGAS)**

[www.elgas.co.nz](http://www.elgas.co.nz)

**ELGAS**