

## AUTHORIZATION TO DEBIT ACCOUNT (ATDA)

		(2.1.2.1.)	
BILLING COMPANY			
Nar	me of BILLING COMPANY (account to be credited)  AXA Philippines	Servicing Branch (Billing Company's Depository Branch) Skyland	
CUSTOMER INFORMATION			
Name of CUSTOMER		Branch of account	
Peso Account to be Debited		Name of ACCOUNTHOLDER	
□Current			
□Regular-SA		Account Number (13 – digit account number)	
□ ATM-SA		Account Number (13 – digit account number)	
* Pr	epaid and Paycards are card NOT allowed for enrollment	-	
Billin	g/Policy/Subscriber Number	Contact Person and Number/s	
I/We, a client of the above BILLING COMPANY with Billing Reference Number stated above, hereby agree and bind myself/ourselves to the following terms and conditions in relation to my/our current/savings account maintained with METROBANK:			
1.	. I/we am/are authorizing METROBANK to debit the cleared and withdrawable funds of my/our abovementioned account in payment of the bills due to the BILLING COMPANY. The amount to be debited and the frequency of debiting that will be provided by the BILLING COMPANY to METROBANK shall be binding against me/us.		
2.	I/we shall notify METROBANK immediately of any a	and all changes in my/our billing reference number(s).	
3.	. For purposes of this arrangement, I/we agree to waive the application of Republic Act 1405 (Secrecy of Bank Deposits Law) and hereby authorize METROBANK to disclose to the BILLING COMPANY any information pertaining to my/our aforementioned account as may be necessary for the implementation of this agreement.		
4.	Consistent unposting/non-debiting of my/our accoummediate revocation/cancellation of this debit arrangement.	unt due to unavailability/insufficiency of funds is a ground for the ngement even without prior notice to me/us.	
5.		isconduct committed by METROBANK, any discrepancy between and the amount reflected in the billing reference shall be resolved elves as the client.	
6.	. I/we authorize METROBANK to reverse any crediting/debiting to my/our account and shall reimburse METROBANK if, at the time of reversal, the balance of my account is not sufficient to effect the reversal.		
7.	The ATDA agreement between METROBANK and the BILLING COMPANY may be cancelled anytime by either party without need of prior written notice of termination to me/us.		
8.	8. This authorization shall be on a continuing basis unless cancelled by the undersigned in writing or as determined by the BILLING COMPANY.		
NOTE: PLEASE MAKE SURE THAT YOUR SIGNATURE MATCHES THE SIGNATURE IN YOUR CUSTOMER SIGNATURE CARD.			
	Client's Signature Over Printed Name	Client's Signature Over Printed Name	
FOR BANK'S USE ONLY			
Sigr	nature Verified by:	Approved by:	
	Signature Over Printed Name Date	Signature Over Printed Name Date	