



CONTACT DETAILS

Domestic Licence: (011) 330 9555 | tvlic.info@sabc.co.za
 Business Licence: (011) 330 9702 | businesstvlic@sabc.co.za
 Retailer Licence: (011) 330 9707 | dealers@sabc.co.za
 Web: www.tvlic.co.za



Debit Order Authorisation

TV LICENCE ACCOUNT NO.

IDENTITY / BUSINESS REGISTRATION NO.

SURNAME / BUSINESS NAME

TITLE (Mr, Mrs, etc.) INITIALS

PHYSICAL ADDRESS

 POSTCODE

POSTAL ADDRESS

 POSTCODE

For Business/Retailer provide details of the contact person (Title, Initials, Surname & Designation)

TEL (HOME) () TEL (WORK/BUSINESS) ()

CELL E-MAIL

DOMESTIC LICENCE BUSINESS LICENCE RETAILER LICENCE

NUMBER OF SETS

NEW DEBIT ORDER APPLICATION

DEBIT ORDER AMENDMENT

PLEASE NOTE: A concessionary domestic licence/Business TV Licence/Retailer TV Licence is payable **only on an annual** basis.

1. BANK

NAME OF BANK

ACCOUNT NO.

BRANCH NAME

BRANCH CODE

2. CREDIT CARD

ACCOUNT NO.

TYPE OF CARD MASTER VISA EXPIRY DATE M M Y Y

ACCOUNT SAVINGS
 TRANSMISSION
 CHEQUE

PAYMENT MONTHLY
 ONCE OFF/ANNUAL

NO. OF MONTHS FOR PAYMENT PERIOD

3	6	9	12	Other
<input type="text"/>				

PLEASE MARK WHICH DAY OF THE MONTH IS SUITABLE FOR THIS DEDUCTION WITH AN X

1 st	15 th	20 th	25 th	26 th
<input type="text"/>				
27 th	28 th	29 th	30 th	31 st
<input type="text"/>				

DATE ON WHICH DEBIT ORDER TAKES EFFECT MONTH YEAR

I hereby authorise TV Licences to effect the following: (Please select one of the options below with an X)

- I hereby grant TV Licences permission to continue with an annual debit order deduction of my TV Licence due for renewal.
- I hereby grant TV Licences permission to continue with monthly deductions of my domestic TV Licence due for renewal.
- I do not choose to continue paying my TV Licence renewal via a debit order. Please cancel my debit order for a renewal of TV Licence.

I hereby authorise TV Licences to debit the above bank account at the indicated intervals according to the agreed method of payment for the above period, **until I request TV Licences in writing to cancel this debit order.**

All the appropriate deductions will be made in accordance to the agreed date selected above. Please allow a minimum of 30 days for processing. TV Licences will debit all payments in arrears on this account.

DATE

SIGNATURE

FOR OFFICE USE ONLY		
NAME	CONTACT NO.	DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>