



Direct Debit Authorization Form

Pixius Communications, LLC. offers its customers the convenience of payment by direct debit from a checking/savings account or credit card.

I (we) hereby authorize Pixius Communications, LLC. to initiate debit entries to my (our) checking and/or savings account as indicated below at the depository named below. I (we) authorize Pixius Communications, LLC. to debit and/or credit such account and to initiate, if necessary, credit entries and adjustments for any entries done in error. I (we) agree to all the terms and conditions of authorization.

1. CUSTOMER INFORMATION

** This is a mandatory field.*

First Name *

Last Name *

Date of Birth *
(DD-MM-YYYY)

Address Line 1 *

Address Line 2

Postcode *

City *

State *

Phone No. *

Email *

Pixius Account Number

2. PAYMENT INTRUCTIONS

Please fill in the payment instruction.

Recurring Monthly Debit

Total bill amount

Starting on on

(DD-MM-YYYY)

3. CREDIT CARD DETAILS

** This is a mandatory field.*

Payment Type * VISA MasterCard Discover Amex
Please select one

Name on Card *

Card Number *

Expiry Date *
(DD-MM-YYYY)

Cardholder Signature *

OR

3. BANKING DETAILS

** This is a mandatory field.*

Name of Bank
Please select one

Routing Number *

Account Number *

4. AUTHORIZATION

This authorization is to remain in force in accordance with the Terms and Conditions on this page and on the following page which I/we have read and understood.

Signature of cardholder(s) or account holder(s).

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Name

Name

Date
(DD-MM-YYYY)

Date
(DD-MM-YYYY)

Recurring Payment Authorization

Terms and Conditions

(Credit Card/Debit Card) and E-Sign Consent

By accepting these terms and conditions, you authorize Pixius Communications LLC, ("Service Provider") to charge the credit card or debit the debit card account that you have specified in the payment plan setup process each month in the amount designated in the payment plan setup process. You agree that the payment card specified by you for automatic monthly payments to the Service Provider is, and will continue to be, an account that you own, and that you will maintain sufficient availability under your credit card limit, or sufficient funds in the account linked to your debit card, as applicable, to pay your monthly designated amount. The automatic monthly charge to your credit card or debit to your debit card account will occur on or after the due date specified by the Contract/In Service plan setup process.

These terms and conditions will constitute your copy of your recurring payment authorization to Pixius. Please print and retain a copy of this recurring payment authorization for your records.

You can cancel your recurring payment authorization only by contacting the Service Provider by telephone or notifying the Service Provider in writing at address on the Statement or as provided in the email. Your request to cancel your recurring payment authorization must be received by the Service Provider at least three business days before the designated due date for the month in which your request is made. If your cancellation request is submitted after this time, the cancellation will not take effect until the following billing cycle for your statement. If you cancel your recurring payment authorization, you will then be responsible for taking the appropriate action to pay your bill in full on or before the statement due date.

E-SIGN CONSENT REGARDING RECURRING PAYMENT AUTHORIZATION

1. **Scope of Consent.** You acknowledge and agree that by accepting the above recurring payment terms and conditions ("Recurring Payment Terms"), you consent to receive a copy of your payment authorization for recurring monthly payments of your Service Provider statement in electronic form only instead of receiving a paper copy. This consent applies only to recurring payment authorizations as to which the Service Provider is required to provide you with a written copy under applicable law.
2. **No Withdrawal of Consent.** The Service Provider cannot process your online recurring payment authorization unless you are willing to receive, in electronic form only, any copy of the Recurring Payment Terms that we are required to provide to you in writing under applicable law. Consequently, once you have accepted the Recurring Payment Terms, you cannot withdraw your consent to receive your copy of the Recurring Payment Terms in electronic form. However, you will still be able to cancel your recurring payment authorization in accordance with the Recurring Payment Terms.
3. **Paper Copy.** If you wish to obtain a paper copy of your recurring payment authorization, you may do so by printing the Recurring Payment Terms yourself.
4. **Minimum Technical Requirements.** In order to access, view and retain the Recurring Payment Terms, you must have a personal computer and operating system software that will support operation of the following web browser requirements: Internet Explorer 6.0 or higher; or Firefox 2.0 or higher.
Browser must have JavaScript and cookies enabled

In addition, your computer must have Internet connectivity. In order to retain an electronic copy of the Recurring Payment Terms, your personal computer will also need to have the capability to save and store the Recurring Payment Terms or you will need a working printer properly connected to your computer.

Recurring Direct Debit Authorization Terms and Conditions (Checking Account) and E-Sign Consent

1. I/We hereby authorize my/our designated Bank ("the Bank") to effect transfers from my/our account with the Bank to that of PIXIUS COMMUNICATIONS, LLC ("Pixius") in accordance with such instructions as the Bank may receive from Pixius from time to time for the purpose of repaying any indebtedness at any time owed by me/us to Pixius including, without limitation, monthly payments in respect of the service approved by Pixius, the total outstanding amount in respect of the said service, interest payments, all charges, fees and expenses applicable to me/us and other liabilities at any time owed by me/us to Pixius, without reference to or consent from me/us notwithstanding any dispute or purported revocation of the rights of Pixius hereunder. I/We agree that the Bank shall not be obliged to ascertain whether or not notice of such transfer has been given to me/us.
2. I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our said account which may arise as a result of any such transfer(s). I/We agree that should there be insufficient funds in my/our said account to meet any transfer hereby authorized, the Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may charge the usual fees to be paid by me/us. Notwithstanding the foregoing, I/we undertake to maintain, at all times, sufficient funds in my/our said account for repayment to Pixius.
3. I/We confirm that, my/our signature(s) on the authorization is/are the same as that for the operation of my/our said account. The authorization shall continue to have effect until full repayment to the satisfaction of Pixius. All costs, charges, interest, fees and expenses that may be levied by the Bank in connection with this arrangement shall be borne by me/us.
4. I/We hereby authorize Pixius to provide, from time to time, the Bank with all information about me/us and about my/our account with Pixius for the purpose of establishing or continuing this arrangement. I/We also authorize the Bank to provide, from time to time, to Pixius all such information relating to my/our account with the Bank.
5. I/We hereby undertake to indemnify upon demand Pixius against all losses, damages, costs, expenses, claims, demands, proceedings, and liabilities of whatsoever nature that it may suffer or incur, directly or indirectly, arising out of this arrangement except to the extent that the same is solely caused by the willful misconduct or negligence of Pixius or its employees or agents.