申請／修改／取消代付款授權書(專用表格)
Debit Authorization for Application/Amendment/Cancellation (Specific form)

日期
Date:_____

☐ 中國銀行澳門分行　　☐ 中國銀行（澳門）

本人（等）／本公司茲授權中國銀行澳門分行／中國銀行（澳門）（以下簡稱　貴銀行）辦理以下事項（以"✓"選擇所需項目）。

☐ 甲項：在本人（等）／本公司於　貴銀行開立之賬戶（賬戶號碼附誌如下）內支取款項，繳付下述機構／公司／學校的有關費用，直至另行通知為止。如本人（等）／本公司提供　貴銀行借記卡卡號辦理以下事項，　貴銀行有權於借記卡賬戶組合內依據本人（等）／本公司選擇的繳費賬戶類別支取款項。

☐ 申請代付款；　☐ 修改代付款；

本人（等）／本公司知悉及遵守下述條款辦理：

1. 貴銀行接到機構／公司／學校的付款通知即可支付，款項按機構／公司／學校所提供之金額扣除。
2. 如該賬款未能自本人（等）／本公司之銀行賬戶內支付（包括但不限於因本人（等）／本公司賬戶結餘少於　貴銀行規定的最低餘額而無法支付賬款），一切責任及後果，概與　貴銀行無涉。
3. 如有任何令授權書失效之變更，本人（等）／本公司必須書面通知　貴銀行。　貴銀行在收到書面通知前，本授權書繼續有效。但如本人（等）／本公司之銀行賬戶因賬戶可用餘額不足，而連續多次（根據機構／公司／學校所指定的次數）未能支付賬款，則　貴銀行可有權不經通知而撤銷此項授權。
4. 貴銀行有權徵收服務費用，並可由本人（等）／本公司之銀行賬戶內支付。
5. 銀行認為必要和適當時，不必通知或取得本人（等）／本公司同意有權將有關的賬戶資料披露給其他機構。
6. 本人（等）／本公司授權　貴銀行可根據自動扣賬當天　貴銀行所指定的匯率將轉賬款項兌換成受益人指定之收款貨幣。
7. 本人（等）／本公司同意如由於本授權書並非直接交予　貴銀行以致本授權書上所載之資料披露予第三者知悉，由此引起之任何法律或其他經濟責任由本人（等）／本公司承擔概與　貴銀行無涉。

☐ 乙項：本人（等）／本公司正式通知　貴銀行由即日起取消前辦之代付款授權。

☐ BANK OF CHINA MACAU BRANCH　　☐ BANK OF CHINA (MACAU)

I/We/Our company hereby authorize Bank of China Macau Branch / Bank of China (Macau) (hereinafter referred to as "the bank") to act as per instruction(s) (marked with "✓") below:

☐ A. To effect transfers from my/our/our company's account specified below to the account of the entity/company/educational institute (hereinafter referred to as "the Beneficiary"), details of which specified below, such sum or sums as the Beneficiary may from time to time advise the Bank. This authorization shall remain valid until further notice. If I/we/our company authorize(s) the Bank to handle the debit authorization selected below with a BOC debit card, the Bank may debit the account (account type specified below) available in such BOC debit card.

☐ Application for debit authorization　☐ Amendment of debit authorization

I/We/Our company further agree that:

1. The Bank may effect transfers from my/our/our company said account such sum or sums as advised by the Beneficiary at any time with immediate effect.
2. Under no circumstances shall the Bank be held responsible for any consequence(s) as a result of unsuccessful transfer of fund(s) from my/our/our company's account (including, but not limited to the situation when the balance of my/our/our company's account less than the minimum balance of the Bank so that it can't be made any transfer).
3. Any variation or cancellation of this authorization has to be given by notice in writing. This authorization shall remain valid unless such notice is given to and received by the Bank. For the particular and consecutive number of times (as specified by the Beneficiary), transfers are not effected due to no sufficient available fund in my/our/our company said account, the Bank may at its own discretion not to comply with or act further with this authorization without notice to me/us.
4. Service charge of the Bank will be debited from my/our/our company said account.
5. The Bank may disclose details of my/our/our company said account to any other third party if the Bank finds it necessary and appropriate.
6. The Bank shall be entitled to convert the sum or sums to be transferred into the currency accepted by the Beneficiary at a rate determined by the Bank.
7. If this "Debit Authorization Form" is not directly sent to your bank, I/we/our company agree to take all the legal or/and economical responsibilities caused by disclosing the details of the said form to any other third party. Under no circumstances your bank shall be responsible.

☐ B. Notice is hereby given to the Bank to cancel my/our/our company debit authorization to effect transfers from my/our/our company's account specified below to the account of the Beneficiary, details of which specified below, with immediate effect.

繳費賬號
Dr. A/C No. : _____

繳費賬戶幣別：☐澳門元 MOP　類　別：☐儲蓄賬戶 Saving A/C
Currency of A/C　☐港元 HKD　A/C Type　☐支票賬戶 Current A/C

戶名
A/C Name: _____

公司名稱 Beneficial Company	收款公司編號 Company Code e.x. 012345-300-0001	合同號碼 Contract Number	公司名稱 Beneficial Company	收款公司編號 Company Code e.x. 012345-300-0001	合同號碼 Contract Number

本人（等）／本公司同意上述條款並確認資料之內容。
I/We/Our company agree the above terms and confirm the concerned information.

覆核	經辦

_____
存戶簽署(按原留印鑑簽署) Please use the signature(s) filed with the Blank

☐ 上述申請已由系統自動取消。取消日期：_____；

☐ 上述申請已由客戶要求取消，取消表格附後。取消日期：_____。

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