

DATA CONFIRMATION FORM
BDB DATA BUREAU (PTY) LTD

TO:

FROM:

OPERATIONS DEPARTMENT 9 TH FLOOR CAPITAL ALLIANCE BUILDING 162 ANDERSON STREET JOHANNESBURG 2001 FAX: (011) 223-9321/2/3/4	
	Contact Person :
	Tel : ()
	Fax : ()
	Cell :

CLIENT INSTRUCTIONS

1. THIS FORM MUST BE COMPLETED AND ACCOMPANY EVERY SALARY SCHEDULE / DISKETTE / ELECTRONIC MAIL TRANSMISSION DELIVERED, E-MAILED OR FAXED TO BDB DATA BUREAU (PTY) LTD FOR PROCESSING.
2. SALARY SCHEDULES / DEBIT ORDER COLLECTIONS / DISKETTE / E-MAIL TRANSMISSIONS MUST BE DELIVERED TO BDB UNDER THE FOLLOWING CONDITIONS:

SALARIES / WAGES / CREDITOR OR OTHER PAYMENT TRANSMISSIONS:

DISKETTE & E-MAIL TRANSMISSIONS

- AT LEAST **ONE WORKING DAY** BEFORE ACTION DATE (CUT OFF TIME 10H00).

PAPER SALARY SCHEDULES

- AT LEAST **TWO WORKING DAYS** BEFORE ACTION DATE (CUT OFF TIME 10H00).

DEBIT ORDER COLLECTIONS TRANSMISSIONS:

DISKETTE & E-MAIL TRANSMISSIONS

- AT LEAST **THREE WORKING DAYS** BEFORE ACTION DATE (CUT OFF TIME 10H00).

PAPER SCHEDULES

- AT LEAST **FIVE WORKING DAYS** BEFORE ACTION DATE (CUT OFF TIME 10H00)

NOTE: BDB CANNOT BE HELD RESPONSIBLE FOR ACCOUNTS NOT BEING CREDITED ON ACTION DATE

- *WHEN DATA IS SUBMITTED TO BDB LATE.*
 - *WHEN CORRECT ACCOUNT DETAILS ARE UNAVAILABLE BEFORE CUT OFF.*
3. THE PAY OFFICER / FINANCIAL MANAGER MUST SIGN THIS FORM AS A DECLARATION THAT THE DETAILS ARE TRUE AND AS AN AUTHORISATION TO DEBIT THE STIPULATED ACCOUNT FOR THE AMOUNT OF THE SCHEDULE WHERE APPLICABLE.

SCHEDULE / DISKETTE / E-MAIL DETAILS

BDB USER CODE:	E-MAIL ADDRESS USED:
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TODAYS DATE:

ACTION DATE (Pay Date):

RAND VALUE TO BE PROCESSED:

NUMBER OF ENTRIES:

BANKING ACCOUNT DETAILS

NAME OF BANK:

BRANCH NAME:

BANK ACCOUNT NUMBER:

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(PRINT NAME)

(AUTHORISED SIGNATORY)