My Resolution Life How to Guide **Digital direct debit** form Bank, credit/debit accounts only



Digital direct debit form

Locating the form

• Access the form through Find a form

Completing the search criteria

Step1 – Click on the down arrow and scroll to Change my payment details

Step 2 – You can either type in your client's product name or scroll to their product name

	Select options	
	A	
tep 2	. Select your product: * *	

Step 1. Select what you would like to do:

Select options

Which form is the right one?

When the Search Results are displayed, you will select the **Digital** form option to complete the form online.

Digital direct debit form

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Step 1

- Complete all **Policy owner details** marked with an asterix
- We encourage your client to provide their email address, so we can email them their request confirmation.*
- Your client will need to provide either a mobile number or home number.*

If your client does not provide a mobile or home number, then a paper form will need to be completed.

Step 2

- Your client will need to tick the **reCAPTCHA** box (digital confirmation they're human)
- Select **Next** to continue

*If your client does not supply an email address or mobile number, then confirmation <u>will not be sent</u> to your client, but the request will be recorded against their policy with us.

Direct	deb	it r	equ	est

Policy/P	lan number * 🛛
First na	ne *
Last nar	ne *
Date of	birth *
Email ac	Idress * I don't have an email address
Mobile 1	lumber
*	(+61) ~
Home N	umber
*	(+61) ~
is reCAPTCHA is fe a are seeing this.	r testing purposes only. Please report to the site while if at a robot reCAPTCHA Preasy - Terma
hat you need t	o know
	istralasia Limited ABN 84 079 300 379 AESI. No. 233671 (Resolution Life) is the issuer of this form. The information contained i

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Step 3

- A pop up will appear, providing your client with the direct debit service agreement which is relevant to their product
- Your client will be able to click on the link for more information
- To continue, your client will click **OK**

Policy/Plan num	ber* o			
P130276607				
First name *				
John				
Last name *				
Test				
Date of birth	2		×	
04/07/1977	0	Before you begin		
Email addres	Please read	the direct debit information shee	t for more	
patricia.pinto	information	n about this direct debit request.		
		Ok		
Mobile Numb				
(+61)				
Home Number				
(+61)		~		
rcCAPTCHA is for testine numeror	only. Please report to the site	alminif		
l'm not a robot				
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at you need to know				
olution Life Australasia Lim	ited ABN 84 079 300 3	379, AFSL No. 233671 (Resolution Life) is the iss	aer of this form. The inform	ation contained in th
a sight for your	and it does not contai	n any financial product advice or make any recorr	mendations about a financ	ial product or service
olution Life is part of the Re	esolution Life Group ar	nd can be contacted via resolutionlife.com.au/con	tact-us or by calling 133 73	i1.

Use this form to set up or update an existing direct debit payment from your bank account or credit/debit card

Direct debit request

Setting up a new direct debit

Step 4

 Your client can choose from 3 options to proceed

Note

 Update card expiry date will only appear if the policy is set up with an existing credit/debit card.

Option 1: Set up a new direct debit – Payment method

- Your client will select their payment method
- The payment frequency displayed will be based on your client's policy

Notes

- For <u>superannuation</u> or <u>investment</u> policies please provide Start date and Payment amount.
- Depending on your clients account with us, additional pop-ups may appear with additional information such as contribution fee or frequency loading information.
- Credit/Debit card availability depends on the entered policy

Direct debit setu	p	
What do you want to do?		
Set up a new direct de	Dit Update an existing direct debit	Update card expiry date
Back		Next

What do you want to do?		
O Set up a new direct de	bit Update an existing direct Upda	te card expiry date
Payment method *		
Bank account	Credit/Debit card	
Payment frequency		
- select -		~
Back		Next

Setting up a new direct debit

Option 1: Set up a new direct debit – Bank account details

- All fields marked with an asterix must be completed
- Your clients BSB number is digitally validated when entered, updating the **Name of institution** and **Branch location** fields.

Please enter your bank	details	
Account name *		
BSB number *	Account number*	
Name of institution		
Branch location		
		Nové

Setting up a new direct debit

Option 1: Set up a new direct debit – Credit/debit card details

 All fields marked with an asterix must be completed

Note:

CVN can also be known as CSC/CVC/CVV

Cardholder name *				envi te
Name				"Connent
Card number *				
Number				
Card expiry date *				
Month	~	1	Year	~
CVN * 🕐				
XXXX				

Update an existing direct debit

Option 2: Update an existing direct debit

- All fields marked with an asterix need to be completed
- Payment frequency:
- If your clients selects Yes, the payment frequency displayed will be based on your client's policy
- If your client selects No, no payment frequency option will be displayed.

Note:

- For <u>superannuation</u> or <u>investment</u> policies your client must provide **Payment amount**.
- Depending on your clients account with us, additional pop-ups may appear with additional information such as contribution fee or frequency loading information.
- Credit/Debit card availability depends on the entered policy.

O Update an existing direct Update card expiry date
Credit/Debit card
frequency?*
○ No
Next

Update an existing direct debit

Option 2: Update an existing direct debit– Bank account details

- All fields marked with an asterix must be completed
- Your clients BSB number is digitally validated when entered, updating the **Name of institution** and **Branch location** fields.

Account name *		
BSB number *	Account number*	
Name of institution		
Branch location		

Update an existing direct debit

Option 2: Update an existing direct debit– Credit/debit card details

All fields marked with an asterix must be completed

Note:

CVN can also be known as CSC/CVC/CVV

Cardholder name *				Con te
Name				STIGNINEN,
Card number *				VISA
Number				
Card expiry date *				
Month	~	7	Year	~
CVN * ⑦				
XXXX				

Update card expiry date

Option 3: Update card expiry date

- All fields marked with an asterix must be completed
- The payment frequency displayed will be based on your client's policy

What do you want	to do?				
Set up a new d	lirect debit	Update an exist	ting direct O	Update card exp	piry date
Payment frequency Fortnightly	y*				

Update card expiry date

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Option 3: Update card expiry date – Credit/debit card details

• All fields marked with an asterix must be completed

Note:

• CVN can also be known as CSC/CVC/CVV

Cardholder name *				envin Tesa
Name				Conment.
Card number *				VISA
Number				
Card expiry date *				
Month	~	/	Year	~
CVN * ⑦				
XXX				

Review your direct debit request

Step 5

- Ensure that your client has checked the Review your direct debit page to ensure that their details are correct.
- It is important that your client has <u>read the</u> <u>declaration</u> and ticked the <u>acknowledgment</u> <u>box.</u>
- If there are multiple account holders, select Add another signature.
- Once all the details are confirmed, please **Submit**.

•	R	eview	your	direct	debi	l
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Policy number Payment method Cardholder name Card number Card expiry date

Declaration and authorisation

By completing this direct debit request form, I/We acknowledge and agree with the following statements:

 I/We request Resolution Life Australasia Limited (Resolution Life) to debit the bank or credit card account nominated above with any amounts which they may debit or charge to me/us through the direct debit system.

I/We understand that Resolution Life or I/We may terminate this request at any time.

I/We have read and understood the information provided on the direct debit request information sheet.

• I/We have read and agree to the terms of the direct debit service agreement.

 I/We have read Resolution Life's privacy policy, which is available at resolutionlife.com.au/privacy, and I/We acknowledge how Resolution Life handles, stores, collects, uses and discloses my personal and sensitive information.

I/We acknowledge and agree with the above statements

First Name *	Last Name *
Signature	

Reset	Confirm	
Add anoth	er signature	
f there are multiple pol	cy owners, please add all policy owner signatures	
Beet		Contraction 1

Confirmation

Step 6

- In Step 1, your client would have added either their email address or mobile number.
- If an email address was supplied, then an email confirmation will be sent to them.

- If a mobile number was supplied, then a text message will be sent to them from **ResLife**.
- If no email address or mobile number is provided, then confirmation <u>will not be sent</u> to your client, but the request will be recorded against their policy with us.

If you have any questions or need further clarification, start an online chat with via the Resolution Life <u>website</u>.



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Thank you

What you need to know

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