



HIGHER EDUCATION LOANS BOARD - DIRECT DEBIT

Credit Card Payments



Paying by Direct Debit Transfer provides you with a simple, reliable and economical way of settling your HELB account. HELB invites you to sign a Direct Debit Authority authorising your bank to pay us variable amounts from your credit card account at our request. The Authority you will sign will be for _____ amounts.

How will you benefit?

- 1 You will no longer have to worry about remembering to pay your debt on time.
- 2 You will no longer have to wait on long queues at our / agency banking halls

What HELB guarantees

Our Direct Debit Transfers will collect funds from the credit card account named in your Authority, paying only for amounts that HELB shall bill in advance

TO Higher Educations Loans Board
 P. O. Box 69489
 Postal Code 00400
 Nairobi

FROM

DIRECT DEBIT AUTHORITY

HELB Acct Name _____
First Middle Surname

National Identity Number _____

Address _____

Relationship of HELB account to the Cardholder:

Owner Other Specify: _____

DETAILS OF MY CREDIT CARD ACCOUNT AS FOLLOWS:-

Name on Card _____
First Middle Surname

Last ID digits of the Card Number _____

Expiry Date ____/____

Month / Year

Card Type Visa
 MasterCard

Service Offer for Credit Cards Only

CVV2 _____ *3 digit number on signature stripe*

Mobile Number * _____

Preferred Maximum _____ *(Please Specify)*

Amount in Words _____

Additional Documents Required: Copy of the Credit cardholders National ID card (for residents) or Passport (for non-residents)

I hereby confirm that the information provided is accurate and undertake to inform HELB of any changes. I authorise HELB to draw against my credit card account the amount necessary for payment of my HELB loan on a monthly basis.

I understand that the amounts is _____ and I will be debited on the HELB loan due date. I understand that the withdrawals hereby authorised will be processed by Direct Debit Transfers, and I also understand that details of each withdrawal will be printed on my credit card statement.

This Authority may be cancelled by giving HELB 30 days notice in writing, sent/ delivered to our offices. I understand that I shall not be entitled to any refund of amounts which HELB have already withdrawn while this Authority was in force if such amounts were legally owing to HELB. Receipt of this Authority by HELB shall be regarded as receipt thereof by my credit card issuer (whichever it is or will be). I

understand that if any Direct Debit Transfer is paid, which breaches the terms of this Authority, HELB will make a refund upon demand.

Signature to confirm your order _____ on this _____ day of _____ 20____
(Service to be activated 30 days from date of submission)

** Mobile number required to facilitate HELB service notifications via SMS*

For Official Use Only	Region _____	Date _____
Appl. Received by _____	Staff No. _____	Signature _____
Revenue Acct Officer _____	Staff No. _____	Date Processed _____
		Signature _____