

## Authority to make deductions from wages/salary

Please read this form carefully before filling it in. When it is complete, send or give it to your employer.

Name of employer

Address of employer

I  authorise you to pay

Housing New Zealand, out of wages/salary payable to me, the sum of  dollars

cents, every week/fortnight, starting from  / /

I further authorise you to adjust the above payment in future, by the amount of any increase or decrease in rent as notified in writing by me, following a rent review.

When making payments please quote the following payment reference number

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For direct credit purposes Housing New Zealand's bank account is

Bank

Branch

Account

Suffix

0	2
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0	1	9	1
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0	1	1	8	6	6	8
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0	0	0
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Payee reference (payment reference number)

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Payee particulars (customer name)

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Signed

Date

 / /

*Please cut here*

## Acknowledgement of deductions from wages/salary

To be returned to Housing New Zealand at the address below:

Housing New Zealand

PO Box

City/Town

Attention

Payment reference

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**Employer – please complete the following details:**

We acknowledge the authority signed by  to make rent payments to Housing New Zealand.

Payment of \$  will be sent/direct credited every week/fortnight, starting from  / /

Signed

Date

 / /

Designation

Company

Contact telephone number

(0 )