



Please fill in the whole form excluding official use box using a ball point pen and send it to:

Care Inspectorate Compass House 11 Riverside Drive DUNDEE DD1 4NY
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Originator's Identification Number

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For Care Inspectorate Use Only This is not part of the instruction to your Bank or Building Society.

Name(s) of Account Holder(s)


Bank/Building Society account number

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Branch Sort Code

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Name and full postal address of your Bank or Building Society

To: The Manager	Bank/Building Society
Address	
Postcode	

Instruction to your Bank or Building Society

Please pay Care Inspectorate Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with the Care Inspectorate and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

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Date

Reference Number

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Banks and Building Societies may not accept Direct Debit Instructions from some types of account  
This guarantee should be detached and retained by the Payer.

DDI1

## The Direct Debit Guarantee



- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change the Care Inspectorate will notify you 10 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by the Care Inspectorate or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- If you receive a refund you are not entitled to, you must pay it back when the Care Inspectorate ask you to.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.