| Metrobank | **AUTHORIZATION TO DEBIT ACCOUNT (ATDA)** | Date<br>MM / DD / YYYY |
|---|---|---|

Tick (✓) the appropriate box:
☐ NEW ENROLLMENT ☐ UPDATE CONTACT DETAILS

**I. BILLING COMPANY**

| Name of BILLING COMPANY/MERCHANT | Servicing Branch (Billing Company's Depository Branch) |
|---|---|
| AXA Philippines | GT Tower |

**II. CUSTOMER INFORMATION**

Name of ACCOUNTHOLDER *(account to be debited)*

13-digit Account Number *(account to be debited)*

| | | | - | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Branch of account

Account to be Debited
- ❑ Peso current
- ❑ Peso ATM-SA
- ❑ Peso Regular-SA
- ❑ Other currency:

***NOTE:*** *The following are* ***NOT*** *allowed for enrollment:*
** Prepaid card / cash card / pay card*
** Payroll account (if Metrobank employee)*

Payor Reference/Billing/Policy/Subscriber Number

**CONTACT DETAILS**

Name of Contact Person

Mobile Number

Email Address

**III. TERMS AND CONDITIONS**

I/We, a client of the above BILLING COMPANY with Billing Reference Number stated above, hereby agree and bind myself/ourselves to the following terms and conditions in relation to my/our current/savings account maintained with METROBANK:

1. I/we am/are authorizing METROBANK to debit the cleared and withdrawable funds of my/our abovementioned account in payment of the bills due to the BILLING COMPANY. The amount to be debited and the frequency of debiting that will be provided by the BILLING COMPANY to METROBANK shall be binding against me/us.
2. I/we understand that debit of funds from my account for the payment of due bills shall be initiated by the BILLING COMPANY.
3. Consistent unposting/non-debiting of my/our account due to unavailability/insufficiency of funds is a ground for the immediate revocation/cancellation of this debit arrangement even without prior notice to me/us.
4. In the absence of any gross negligence or willful misconduct committed by METROBANK, any discrepancy between the amount actually debited from my/our account and the amount reflected in the billing reference shall be resolved between the BILLING COMPANY and myself/ourselves as the client.
5. I/we authorize METROBANK to reverse any crediting/debiting to my/our account and shall reimburse METROBANK if, at the time of reversal, the balance of my account is not sufficient to effect the reversal.
6. The ATDA agreement between METROBANK and the BILLING COMPANY may be cancelled anytime by either party without need of prior written notice of termination to me/us.
7. This ATDA agreement shall continue to be valid and effective unless cancelled by the undersigned in writing or as determined by the BILLING COMPANY.
8. I/we shall notify METROBANK immediately in case of new or additional enrollment or any change in my/our billing reference number(s); or update in my contact details.
9. For purposes of this arrangement, I/we agree to waive the application of Republic Act 1405 (Secrecy of Bank Deposits Law) and Republic Act No. 10173 (Data Privacy Act), and hereby authorize METROBANK to disclose the following information to the BILLING COMPANY: (a) Name of Customer/Accountholder; (b) Account Number; (c) Contact Information; and (d) any information that I provided pertaining to my/our aforementioned account, as may be necessary for the implementation of this agreement.
10. Metrobank recognizes its responsibilities and your rights under the Data Privacy Act of 2012 (R.A. 10173). We are collecting your personal information for purposes of coordination and signature verification, as well as for contact in case of any updates. The processing and sharing of your personal information shall be in accordance with Metrobank's Privacy Policy found in our website (www.metrobank.com.ph), which you acknowledge to have read and understood. You may revoke this authorization at any time by notifying in writing your branch of account or the bank's Data Protection Officer at dataprotectiondept@metrobank.com.ph. If you revoke these authorizations, it may affect the AUTHORIZATION TO DEBIT ACCOUNT (ATDA). All personal information collected will be stored in a secured location; retained in accordance with Metrobank's retention policies; and only authorized employees will have access to them. If you think that your personal data was mishandled in terms of confidentiality or integrity, or if someone tampered with your personal data without your consent, please do not hesitate to contact our Data Protection Officer through the following:

    10th Floor Metrobank Plaza
    Sen. Gil Puyat Avenue,
    Makati City
    Telephone Number: 63-2-8537-2882
    E-mail address: *dataprotectiondept@metrobank.com.ph*

**NOTE: SIGNATURE MUST MATCH THE SIGNATURE IN YOUR CUSTOMER SIGNATURE CARD.**

Customer's Signature Over Printed Name  Customer's Signature Over Printed Name

**FOR BANK USE ONLY**

Signature Verified by:  Approved by:

Signature Over Printed Name  Date  Signature Over Printed Name  Date

**Note:** Please send the signed ATDA forms to OPG-SSD (5th Floor Annex Building, Metrobank Plaza) within the day the ATDA is received from client.