



www.dcidebt.co.za | info@dcidebt.co.za  
078 904 9404 | 082 087 1985 | 033 817 8453  
219 Boshoff St | PMB | Office No.05 annagreth23@gmail.com

## CLIENT SERVICE AGREEMENT

This service agreement is made effective on this \_\_\_\_\_ day of \_\_\_\_\_, 2023. By

DCI VERSION VERSION 2 AND \_\_\_\_\_

WHEREAS, Client has to seek help to perform debt resolution (services) for client unsecured debts and other debt related to the client.

WHEREAS, DCI V2 desires to assist client in providing the services as set below;

**REMOVAL** is a legal service product for rescissions of Admin order, Debt Review , paid-up Judgements and prescribed accounts of work within 3 months services guarantee.

**DCI PAYMENTS ARRANGEMENTS** it's a once off payment of work related to all credit matters by allowing client to be serviced for the above matters anytime through telephonically or face to face to make arrangements or settle accounts.

**DCI V2 REMOVAL OF JUDGMENT R3000  
ONCE OFF/ INSTALMENTS. DCI V2  
PAYMENT**

I acknowledge all that I am 100% accountable to pay all fees outstanding to my debt councillor, Creditors or any other concerned, so that my case will continue for service at DCI V2 Hold no rights to pay my outstanding fees as service may be supplied. Should client refuse to pay outstanding debt



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### CLIENT SERVICE AGREEMENT

Client NO.:.....

#### PERSONAL INFORMATION

Full Name: \_\_\_\_\_

SURNAME \_\_\_\_\_

ID NO: \_\_\_\_\_ D.O.B \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_

#### PHYSICAL

ADDRESS: \_\_\_\_\_

CELL NO: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_ TEL  
WORK \_\_\_\_\_

EMPL COMPANY NAME \_\_\_\_\_ JOB TITLE \_\_\_\_\_ EMPLOYEE  
CODE: \_\_\_\_\_

COMPANY PAYDATE \_\_\_\_\_ EMPLOYMENT STATUS \_\_\_\_\_ HR  
NO \_\_\_\_\_

COMPANY ADDRESS EMPLOYMENT  
DETAILS  
\_\_\_\_\_

#### NEXT OF KIN

NAME AND SURNAME  
CONTACT NO: \_\_\_\_\_

N DEBIT ORDER.



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ACCOUNT HOLDER \_\_\_\_\_ BANK \_\_\_\_\_ ACCOUNT  
NO: \_\_\_\_\_

BRANCH CODE: \_\_\_\_\_ ACCOUNT TYPE \_\_\_\_\_ SALARY DATE \_\_\_\_\_ AMOUNT R \_\_\_\_\_ NO OF  
INSTALLMENT \_\_\_\_\_.

every month commencing \_\_\_\_\_ in the event that the payment day falls on  
Saturday/Sunday Or recognized south African public holiday , the payment will automatically be debited  
before or next business day. If there is insufficient funds on in the nominated account to meet the obligation  
,then we are entitled to track account.

Signed at: \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 2023.

Signature of main member: \_\_\_\_\_ dated: \_\_\_\_\_.

Agent Name: \_\_\_\_\_ Consultant Name: \_\_\_\_\_ dated: \_\_\_\_\_

On the \_\_\_\_\_ day of each and

