

SEPA direct debit mandate for SEPA core direct debits

To

Name and address of payee	Creditor identifier ¹ (of payee)
	Mandate reference (maximum length: 35 characters)

Mandate for a one-off payment
 Mandate for recurrent payments

SEPA direct debit mandate:

By signing this mandate form, you authorise

(A) _____ to send instructions to your payment service provider to debit your account and
[name of the Payee]

(B) your payment service provider to debit your account in accordance with the instructions from _____ .
[name of the Payee]

As part of your rights, you are entitled to a refund from your payment service provider under the terms and conditions of your agreement with your payment service provider. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

(Copy for payee)

Name of payer's payment service provider	BIC ²
	_ _ _ _ _ _ _ _
IBAN ³	
_ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _	

.....
Place, date, signature(s) of payer(s)

Name and address of payer(s)

Space for any other information provided by payer

¹Where payees are resident in Germany, their creditor identifier is assigned by the Deutsche Bundesbank (see <http://glaeubiger-id.bundesbank.de>)

²Bank Identifier Code

³International Bank Account Number

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