

SEPA direct debit mandate for SEPA core direct debits

То	
Name and address of payee	Creditor identifier¹ (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	
	ons to your payment service provider to debit your account and
[name of the Payee]	
(B) your payment service provider to debit your account in acco	ordance with the instructions from
As part of your rights you are entitled to a refund from your pe	[name of the Payee] ayment service provider under the terms and conditions of your agree
ment with your payment service provider. A refund must be o	claimed within 8 weeks starting from the date on which your accoun
was debited.	
Name of payer's payment service provider	BIC ²
IBAN³	
Place, date, signature(s) of payer(s)	Name and address of payer(s)
riace, date, signature(s) or payer(s)	μ., (ο)
Space for any other information provided by payer	
cpass of any case meaning of the control of payer	

(Copy for payee)



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	Mandate reference (maximum length: 35 characters)
	Mandate for a one-off payment Mandate for recurrent payments
	Mandate for recurrent payments
SEPA direct debit mandate:	
By signing this mandate form, you authorise	
(A) to send i	instructions to your payment service provider to debit your account and
[name of the Payee] (B) your payment service provider to debit your accoun	at in accordance with the instructions from
	[name of the Payee]
ment with your payment service provider. A refund m	n your payment service provider under the terms and conditions of your agree nust be claimed within 8 weeks starting from the date on which your accoun
was debited.	Lavas
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	