

Mandats- Exemplar

1. Exemplar blank

SEPA Direct Debit -Mandat

Mandatsreference:

Name of Company (Creditor Name, Adress):.....

Creditor-ID:.....

I hereby authorise (Name of Company, Creditor) to collect payments from my account by direct debit. At the same time, I hereby instruct my bank to pay the direct debits drawn on my account by (Name of Company, Creditor). I can request my bank, within a period of eight weeks commencing on the debit date, to refund any payment collected by direct debit.

Name

Adress

IBAN

BIC

Date, place, signature

2. Exemplar blank

SEPA Direct Debit -Mandat

Mandatsreference:

Name of Company (Creditor)

(Name, Adress)

CREDITOR- ID:

I hereby authorise (Name of Company, Creditor) to collect payments from my account by direct debit. At the same time, I hereby instruct my bank to pay the direct debits drawn on my account by (Name of Company, Creditor). I can request my bank, within a period of eight weeks commencing on the debit date, to refund any payment collected by direct debit.

Name _____

Adress _____

IBAN _____ BIC _____

Date, place, signature _____

3. Exemplar filled

SEPA Direct Debit -Mandat

1-ZUGSVERSAND GMBH
5020 Salzburg, Musterweg 4
AT01XXX12345678910

LOGO

Mandatsreference 987654321
Customer ID 223344556

Name *Carla Muster*

Adress *Schneise 12, A-0047 Am Berg*

IBAN* _____

BIC* _____

Date, place, signature*

* Please complete all the fields marked

I hereby authorise the Company **1-Zugsversand GMBH**, to collect payments from my account by direct debit. At the same time, I hereby instruct my bank to pay the direct debits drawn on my account by the Company **1-Zugsversand GMBH**.

I can request my bank, within a period of eight weeks commencing on the debit date, to refund any payment collected by direct debit.