

EBS SEPA Direct Debit Mandate



EBS Account Number

Unique Mandate Reference

Unique Mandate Reference (UMR) - to be completed by EBS d.a.c..

By signing this mandate form, you authorise (A) EBS d.a.c. to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from EBS d.a.c..

As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

Please complete all fields marked *

DEBTOR DETAILS

*Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
City	<input type="text"/>
Post Code	<input type="text"/>
Country	<input type="text"/>
*Account Number - IBAN**	<input type="text"/>
*Bank Identifier Code - BIC	<input type="text"/>

**Please confirm with your paying bank that the IBAN for the account you are paying from, as above, can be used for the processing of Direct Debits or it will not process successfully.

CREDITOR DETAILS

*Creditor Name	E B S d. a. c.
*Creditor Identifier	I E 3 9 Z Z Z 9 9 2 9 0 1
*Creditor Address	1 0 M O L E S W O R T H S T R E E T
*City	D U B L I N 2
*Post Code	D 0 2 R 1 2 6
*Country	I R E L A N D
*Type of Payment	<input type="checkbox"/> Recurrent Payment, or <input type="checkbox"/> One-off Payment
*Date of signature	<input type="text"/>

*Please Sign Here

Note: Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.

DATA PROTECTION

For information in relation to how we collect personal information about you, how we use it and how you can interact with us about it, see our Data Protection Notice in our EBS Offices or online at www.ebs.ie/dataprotection. It may change from time to time.