

Sample SEPA Direct Debit Mandate

Insert Creditor's Name and Logo

Unique Mandate Reference

Unique Mandate Reference (UMR) – to be completed by

By signing this mandate form, you authorise (A) _____ to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from _____

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 the fields marked *

Creditor's Name

Creditor's Identifier

Creditor's Address

City

Post Code

Country

Type of payment* Recurrent payment Or One-off payment

Debtor Name*

Debtor Address†

City

Post Code

Country

Debtor account number – IBAN*

Debtor bank identifier code – BIC

Signature & Date*

Day	Month	Year
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

Address of Debtor †(Mandatory when collecting from a non EEA SEPA country or territory)

Please return this mandate to the Creditor

