SEPA Direct Debit Mandate

*Unique Mandate Reference:

*Creditor Identifier:

IE60ZZZ363187



Legal Text: By signing this mandate form, you authorise (A) OneBill Utilities Limited to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from OneBill Utilities Limited.

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 you account was debited. Your rights are explained in a statement that you can obtain from your bank.

YOURS	
*Your Name:	
*Your Address Line 1:	
*Your Address Line 2:	
*City/postcode:	
*Country:	
*Account Number(IBAN):	
*Swift BIC:	
*Type of payment Recurrent \bigcirc Or One-Off Payment \bigcirc (Please Tick $$)	
*Date of signing:	
*Signature(s):	
CREDITORS	
*Creditors Name:	Onebill Utilities Limited
*Creditors Address Line 1:	Hartnett Enterprise Centre TUS, Moylish Park, Limerick.
*Creditors Address Line 2:	V94 E8YF Republic of Ireland
*Country:	Ireland