

Additional Location Form – UK

*Mandatory fields to be completed. Please fill in this merchant additional location form.

Please note: This form must only be used to add outlets.

For any fields not completed data will be taken from the Central MID noted at the top of this form.

Existing Customer Information 1

*Legal Name	*Central Merchant ID (MID)
-------------	----------------------------

New Outlet / Location Information 2

*Sales Rep Code	*RM Rep Code	*Target Live Date	Chain Number	Top Assoc.	*Client Group	*Parent Entity Code
-----------------	--------------	-------------------	--------------	------------	---------------	---------------------

*Trading (DBA) Name (New outlet must have the same Legal Name as existing merchant)	*Trading (DBA) Address is contact for: <input type="checkbox"/> All <input type="checkbox"/> Chargeback <input type="checkbox"/> Communication <input type="checkbox"/> Shipping <input type="checkbox"/> Statement <input type="checkbox"/> Settlement
---	---

*Trading (DBA) Address (if different from above)

*City	*Postcode
-------	-----------

*Attention (First/Middle/Last Name) <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Mr	Email Address
--	---------------

*Phone No.	Mobile No.
------------	------------

*Country of Incorporation	*Government Owned Entity
---------------------------	--------------------------

<input type="checkbox"/>

Web URL www.	Outlet Number / Store Code
-----------------	----------------------------

*Description of goods and/or services that you require Merchant Services for (and, if different from that, please also note your core business activity, products and services offered):

* (Anticipated) Card sales for this outlet p.a.	*Average Transaction Value	*% of total turnover relating to Card Present
		%

*% of total turnover relating to Mail Order / Telephone Order	%	*% of total turnover relating to Internet	%	*Customer Annual Turnover
---	---	---	---	---------------------------

*Please state the country which generates the highest revenue per annum for your business. If you operate in only one country, please state that country

*PCI Level: Please tick the box that best describes your (anticipated) numbers of Transactions

<input type="checkbox"/> Level 4 : Processing less than 20,000 Internet Transactions or up to 1 million MO/TO and Card Present Transactions p.a.	<input type="checkbox"/> Level 3: Processing between 20,000 and 1 million Internet Transactions p.a.	<input type="checkbox"/> Level 2: Processing 1 million to 6 million Transactions p.a.	<input type="checkbox"/> Level 1 – processing >6 million Transactions p.a.
--	--	---	--

*VAT Details	<input type="checkbox"/> VAT Number	<input type="checkbox"/> VAT Number Pending	<input type="checkbox"/> In Business Confirmation <i>(I confirm that I am engaged in business activities but not registered for VAT in the European Union.)</i>
--------------	-------------------------------------	---	---

Other Tax Number <i>(to be completed if VAT Number was not entered above)</i>	<input type="checkbox"/> Corporate Tax Number
<input type="checkbox"/> Income Tax Number	<input type="checkbox"/> Charity Number

Initial contract term 12 months

Chargeback Information 3

*Delivery Method <input type="checkbox"/> Internet <input type="checkbox"/> Post	*Contact Name	*Email	*Phone
---	---------------	--------	--------

Chargeback Address (If different from Trading (DBA) Address or Legal /Registered Office address)

Schedule of Fees 4

By ticking the above box, you acknowledge to have received and agree to the Schedule of Fees annexed to this Add Location Form. The Schedule of Fees annexed to this Add Location Form is only valid for the location this Add Location Form relates to.

Financial Information												5
* Payment Method	EDI	EBA	Chain	ALB	BIE	SAN	AMX	MAN	INV	ABB	ABE	
Delay Days	Funding Frequency: Daily Weekly Monthly			Funding Day		VAT Override: Yes / Rate:		*Faster Payments Yes (with fee) No				
Billing Frequency: Daily Weekly Monthly	Billing Day			Settlement Method: Gross Net		Settlement by Direct Debit: Yes No		Account: All Deposit Billing Chargeback				
*Account Name				Bank Name				*Sort Code				
*Account Number				*IBAN				*SWIFT / BIC Code				

Statement Information				6
Billing Statement	Transaction Detail	Hardcopy (see Schedule of Fees for charge)		Hold Statement
Funding Statement (EDI)	Batch Summary	Online via Reporting Tool		

Reporting Tool			7
Reporting Tool: Yes No	Chain No. or MIDs you want access to	Please tick this box if you would like to view your Chargebacks online via the Reporting Tool	

Full name of selected registered user(s) of the Reporting Tool

Preferred Username (if any)	Email address and telephone number of registered user
-----------------------------	---

Authorised Signatory / Beneficial Owner / Director	8
<p>If the details of the Authorised Signatory/Beneficial Owner/Director of this Add Location form will be the same as that of the original merchant services agreement, then do not complete the section below. However, if the details of any one (or more) of the individuals differ from the original merchant services agreement, then please complete the relevant section(s) below.</p> <p>The individual signing this form ("Authorised Signatory") must complete the information in the section below and tick all applicable boxes.</p> <p>If applicable, please also complete one section for each individual who is the beneficial owner of the Customer. Beneficial Owners are those individuals who are the business owners (e.g. Sole Traders) or who directly or indirectly hold 25% or more of the shares/voting rights ("Interest / control") of the Customer. In the case of a complex structure, please provide details of any individual holding, directly or indirectly, 10% or more of the Interest.</p> <p>Where applicable, please also provide the information requested below for any two directors of the Customer. (Please provide either the date of birth or address). However, in the case of a complex structure please provide the name, date of birth or address for all of the directors of the Customer.</p> <p>Individuals, who perform two or more of these functions, please tick all appropriate boxes and provide the required information by only completing the section once.</p> <p>A "Responsible Party" is an individual who has control over the day-to-day operations of the business. Please ensure that at least one of the individuals identified below is a Responsible Party.</p> <p>Please use the Continuation Page if necessary.</p>	

1) Authorised Signatory	Beneficial Owner	Director (Please tick all applicable boxes)	
*Name (First/Middle/Last Name)	Ms Mrs Miss Mr	*Date of Birth	*Interest % *Responsible Party Yes No
*Private Residential Address			*City
*State / Province		Postcode	*Country Phone No.
Email Address			Mobile No.
*Identification Number (passport no. or government issued no.)		Issue Date	Expiry Date
Nationality/Citizenship (**mandatory for Authorised Signatories & Beneficial Owners only)			If applicable, what is your second nationality?

2) Authorised Signatory		Beneficial Owner		Director (Please tick all applicable boxes)			
*Name (First/Middle/Last Name)	Ms	Mrs	Miss	Mr	*Date of Birth	*Interest %	*Responsible Party Yes No
*Private Residential Address						*City	
*State / Province			Postcode	*Country		Phone No.	
Email Address						Mobile No.	
*Identification Number (passport no. or government issued no.)				Issue Date		Expiry Date	
Nationality/Citizenship (**mandatory for Authorised Signatories & Beneficial Owners only)						If applicable, what is your second nationality?	

3) Authorised Signatory		Beneficial Owner		Director (Please tick all applicable boxes)			
*Name (First/Middle/Last Name)	Ms	Mrs	Miss	Mr	*Date of Birth	*Interest %	*Responsible Party Yes No
*Private Residential Address						*City	
*State / Province			Postcode	*Country		Phone No.	
Email Address						Mobile No.	
*Identification Number (passport no. or government issued no.)				Issue Date		Expiry Date	
Nationality/Citizenship (**mandatory for Authorised Signatories & Beneficial Owners only)						If applicable, what is your second nationality?	

4) Authorised Signatory		Beneficial Owner		Director (Please tick all applicable boxes)			
*Name (First/Middle/Last Name)	Ms	Mrs	Miss	Mr	*Date of Birth	*Interest %	*Responsible Party Yes No
*Private Residential Address						*City	
*State / Province			Postcode	*Country		Phone No.	
Email Address						Mobile No.	
*Identification Number (passport no. or government issued no.)				Issue Date		Expiry Date	
Nationality/Citizenship (**mandatory for Authorised Signatories & Beneficial Owners only)						If applicable, what is your second nationality?	

References to “We”, “Us” or “Our” are references to U.S. Bank Europe DAC, incorporated in Ireland (Registered No. 418442), having its registered office address at Block F1, Cherrywood Business Park, Dublin 18, D18 W2X7, Ireland operating through its UK Branch at 125 Old Broad Street, Fifth Floor, London, EC2N 1AR, United Kingdom.

References to “You”, “you”, “Your” and “your” are defined in the UK Terms of Service (the “TOS”).

By “Your Information” we mean the personal and financial information We obtain from you or from third parties (such as credit reference and fraud prevention agencies, joint account holders, Your employees or officers of Your business, other organisations who introduced Us, or act on your or Our behalf) which, where you are a sole trader or partnership, may relate to you and/or your business partners and guarantors and where you are a company or limited liability partnership, may relate to your officers, shareholders, partners, owners and guarantors.

HOW DO WE USE YOUR INFORMATION?

We use Your Information for the following purposes:

Purpose:	Legal basis of processing:
Where it is necessary to use Your Information in order to provide our services to you.	Contractual necessity
To conduct anti-money laundering checks and fulfil our regulatory obligations in connection with the services.	Legal obligation
To comply with legal requirements and Card Scheme Rules (as such term is defined in the TOS)	Legal obligation, contractual necessity and legitimate interests
To carry out credit checks and other enquiries to help us make decisions about whether to enter into a contract with you and to evaluate our ongoing relationship with you	Legitimate interests
For the prevention, investigation and detection of crime and fraud	Legitimate interests
To analyse and improve the running of our business	Legitimate interests
To market and sell to you products and services offered by Elavon, its Affiliates or third parties, whether relating to Merchant Services or otherwise	Legitimate interests
For analytical purposes and we may share this aggregated information with others from time to time. This regards use of records of the transactions in combination with the records of our customers in an aggregated form	Legitimate interests
For credit-scoring to assess this Application and to verify your identity and that of the Other Individuals	Contractual necessity

Please note that where we are using Your Information and the legal basis of our processing activities is identified as ‘legitimate interests’ you have a right to object to our use of Your Information. Please refer to Your rights section for further details.

HOW DO WE SHARE YOUR INFORMATION?

We may at any time give Your Information to:

- Any organisation who introduced Us or who acts on Your behalf to allow them to provide services to you and/or to allow them to conduct, monitor and analyse their business;
- Service providers, advisors and agents providing services to Us (including our group companies and Affiliates);
- Card Schemes covered by the TOS;
- VMASTM and MATCHTM in order to report Customer’s business name and the name of Customer’s principals to the VMASTM and MATCHTM listings pursuant to the Card Scheme Rules.
- Anyone who has a legal right to require disclosure of your information or to whom we are permitted by law to disclose your information (this may include third parties such as bailiffs, receivers, the police and the courts);
- Regulatory bodies where required for regulatory purposes;
- Credit reference agencies and fraud prevention agencies (for more information on these disclosures please see below);
- Our professional advisors in order to obtain advice in relation to our relationship with you;
- Any person to whom we assign or sub-contract any of the rights or obligations under our agreement with you;
- Third party investors or potential investors in Elavon or its Affiliates or otherwise in the event of the sale, disposal, merger or transfer of the business of Elavon or its Affiliates, or obtaining financing for Elavon’s business, or negotiations in connection with that purpose.

In addition, We may at any time give Your Information to any organisation that requires disclosure of Your Information for regulatory purposes or as a matter of law whether or not their power is derived from an Act/Acts of Government.

You further acknowledge and agree that any information provided in connection with this Application and all other relevant information, may be supplied by Us to our Affiliates for all of the purposes listed above.

OVERSEAS TRANSFERS OF YOUR INFORMATION

We may transfer Your Information to countries outside the UK and the European Economic Area where data protection laws may not be as strict as they are in the UK. If we do so we will put in place appropriate controls to ensure that Your Information is protected adequately, in particular through standard data protection model clauses adopted by the European Commission. For more information about these controls please contact us at EUDataProtectionOffice@elavon.com.

FOR HOW LONG DO WE KEEP YOUR INFORMATION?

We will keep Your Information for as long as we have a contract with you and for as long as we need Your Information for regulatory or evidential purposes after expiry of termination of your contract.

YOUR RIGHTS

Individuals have the following rights under data protection legislation:

- a right to ask for a copy of their personal data
- a right to ask Us to delete or correct any information We hold about them that is inaccurate;
- a right to request erasure of information in certain circumstances;
- a right to data portability (this is a right to ask for Your Information in a commonly used electronic format where information has been provided by the individual and the legal basis for processing that information is consent or contractual necessity);
- a right to restrict processing and a right to object to processing activities in certain circumstances;
- a right to stop Your Information from being used for direct marketing purposes; and
- a right to lodge a complaint with the Data Protection Commissioner (or other supervisory authority in the European Union) if You believe that Your Information has not been processed in accordance with the requirements of the data protection legislation.

Where any processing is based on consent you have a right to withdraw consent at any time, without affecting the lawfulness of processing based on consent before its withdrawal.

If you would like to exercise any of these rights, please contact us at EUDataProtectionOffice@elavon.com.

PROVISION OF INFORMATION ABOUT OTHER PEOPLE

If you are providing personal information about other individuals in this Application, you must explain to those individuals whose personal details you have disclosed ("Other Individuals"), the categories of personal information that is being disclosed and all uses and processing of their personal data as detailed in this Application. This explanation must be provided to Other Individuals before you submit the Application to us.

CREDIT REFERENCE AND FRAUD PREVENTION AGENCIES

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING AND MAINTAINING OF A MERCHANT SERVICES ACCOUNT. To ensure compliance with current legal and regulatory requirements aimed at preventing financial crime, money laundering and terrorist financing and to enable Us to proceed with your Application, We are required to obtain, verify and record information that identifies each person who opens up a merchant services account. We shall search your records and those of the Other Individuals at credit reference agencies who shall supply Us with information as well as information from the Electoral Register for the purpose of verifying your identity and that of the Other Individuals. Alternatively, We may ask you to provide physical forms of identification. Prior to our acceptance of this Application and from time to time thereafter, we may investigate the individual and business history and background of the Customer, each such representative and any other officers, partners, proprietors and/or owners of the Customer, and obtain credit reports or other background investigation reports on each of them that We consider necessary to review the acceptance and continuation of this Application.

Credit reporting agencies and other relevant agencies used by us will compile information to answer those credit inquiries and supply Us with such information as well as information from the Electoral Register for the purpose of verifying your identity and that of the Other Individuals. Credit reference agencies will record any credit searches on their file whether or not this Application proceeds.

It is important that you give Us accurate details. We shall check your details and those of the Other Individuals with crime prevention agencies and if you give Us false or inaccurate information and We suspect fraud, We shall record this. We may disclose Your details and details of how you conduct your business and account to such agencies. This information may be used by other credit grantors for making decisions about you or people with whom you are financially associated. The information may also be used for prevention of financial crime and money laundering.

If upon review of the information submitted in Your Application (which may or may not include all of the checks specified above) it appears that We require further information from You, We shall request for this from You. Please note that unless and until we receive this additional information we cannot proceed with your Application. Please note that any such checks and inquiries may occur after opening of Your merchant services account, as they may be desirable or necessary to evaluate the continuance of the Agreement.

If We are satisfied with the credit checks and other enquiries, this Application, the TOS and the Operating Guide, each updated by Us from time to time, will form your Agreement with Us.

IMPORTANT PRINCIPLES AND OBLIGATIONS

The Customer must obtain an Authorisation Code via an electronic terminal or similar device before completing any Transaction. The Customer understands that an AUTHORISATION CODE IS NOT A GUARANTEE OF ACCEPTANCE OR PAYMENT OF A TRANSACTION. RECEIPT OF AN AUTHORISATION CODE DOES NOT MEAN THAT THE CUSTOMER WILL NOT RECEIVE A CHARGEBACK FOR THAT TRANSACTION.

The Customer further understands and acknowledges that the acceptance of Card Not Present Transactions is done entirely at their/its own risk. All Customers must comply with the requirements of the Payment Card Industry Data Security Standards ("PCI DSS"). We require all Level 4 Merchants (determined by Transaction volume) to validate PCI DSS compliance on an annual basis with initial validation to occur no later than ninety (90) days from when the Application has been accepted by Us. The Customer will be charged the PCI Charges further described in the Schedule of Fees. Further, if you are new to card payment processing, you must also comply with the requirements of the Payment Card Industry Payment Application Data Security Standard ("PCI PA DSS"). You must use a value added re-seller ("VAR") whose payment application software (the software used to process the card payment transactions in a secure manner) is compliant with the PCI PA DSS.

It is very important that you read this Application, the TOS and the Operating Guide, before you submit this Application.

CUSTOMER DECLARATION

By submitting this Application, the Customer and its representative(s) warrant and represent to Us that (i) all information provided in this Application is true, complete and accurate, properly reflects the business, financial condition and principal partners, owners or officers of the Customer; and (ii) the person submitting this Application is duly authorised to and has the power (corporate or otherwise) to bind the Customer to all provisions of this Application and the TOS. Transmission of a Transaction Receipt for a Transaction to Elavon, shall be the Customer's acceptance of and agreement to the TOS.

The submission by a representative of the Customer of this Application, or the transmission of a Transaction Receipt or other evidence of a Transaction to Us, shall be the Customer's acceptance of and agreement to the terms and conditions contained in the Agreement, comprising, this Application, the TOS and the Operating Guide. The Customer agrees to comply with the Application, the TOS, the Operating Guide and all applicable laws, rules and regulations including the rules and regulations of the Card Schemes, and understands that failure to comply may result in termination of processing services. Words and phrases not specifically defined in this Application shall have the same meaning as set out in the TOS.

AUTHORISATION TO USE PERSONAL DATA FOR PAYMENT SERVICE PURPOSES

In order to provide the Merchant Services to You we need to access, retain and process personal data. You hereby authorise us to use personal data to enable us to provide the Merchant Services.

By signing below you agree to and are bound by the statements in this form, including the statements below.

I confirm that I have read and agree that the Merchant Services received by the Customer, including any processing of Transactions by Elavon at the above additional location will be subject to the terms of the Agreement agreed by the Customer and as amended from time to time.

By submitting this application, I confirm that I have read and understood the Privacy Notice.

Signature



Full Name & Title (Please print)

Date (DD/MM/YYYY)

Submitted by (Elavon Representative)

Full Name (Please print)

Signature



Date (DD/MM/YYYY)

Blue fields are for internal use only

Schedule of Fees Partners – UK (Non-CCA)

Blue fields are for internal use only

Customer Information

1

Legal Name:

Merchant ID (MID) if existing customer:

Currency Code:	Parent Chain Number:	American Express No. (if applicable):
----------------	----------------------	---------------------------------------

Selection of Merchant Service Charges Pricing Method

2

Simplified MSC	Interchange ++ (IC++)
----------------	-----------------------

Merchant Service Charges (Simplified MSC)

2.1

Card Type	MSC Rate (%)	MSC Rate per Transaction
Visa Credit		
MasterCard Credit		
Visa Debit		
MasterCard Debit		
Visa V-Pay		
Maestro Domestic		
Maestro within EEA		
Visa Business Credit		
Visa Business Debit		
Visa Purchasing		
Visa Corporate		
MasterCard Business		
MasterCard Purchasing		
MasterCard Fleet		
MasterCard Corporate		
MasterCard Prepaid Commercial		
All Non-EEA Visa		
All Non-EEA Mastercard/Maestro		
Higher Risk Additional Loading Rate	%	

*DCI/Discover		
**JCB		
***Union Pay		

Higher Risk Additional Loading transactions include:

- Card Present not using Chip and PIN or Contactless e.g. swiping magnetic stripe, card holder signature,
- Card Not Present not secured by 3DS e.g. 3DS not effective, telephone order, mail order,
- keying Card number into any device or data unknown,
- file submitted 2 days or more after Card accepted.

This rate only applies to MasterCard/Maestro and Visa cards.

Non-EEA: all Transactions where the Card is issued and/or Merchant is outside of the EEA

***DCI/Discover** consists of DCI/Discover Consumer Credit, DCI/Discover Consumer Debit, DCI/Discover Commercial Credit, DCI/Discover Commercial Debit

****JCB** consists of JCB Consumer Credit, JCB Consumer Debit, JCB Commercial Credit/Debit

*****Union Pay** consist of Union Pay Consumer Debit, Union Pay Consumer Credit, Union Pay Commercial Debit, Union Pay Commercial Credit

Simplified MSC includes interchange and card scheme fees.

Monetary Pricing Program number if not standard:

Schedule of Fees Partners – UK (Non-CCA)

Blue fields are for internal use only

Authorisation Fees and Higher Risk additional Loading Fee 2.1.1

An Authorisation Fee of £0.03 per Transaction is payable unless set out otherwise in section below and Higher Risk Additional Loading of 1.2% is payable unless set out otherwise in section above

Authorisation PP#:	Authorisation fee (per Transaction): £
--------------------	--

Pre-Authorisation and Integrity Fees 2.1.2

Pre-Authorisation Fee for all Mastercard and Maestro Card Types (per Pre-Authorisation): 0.02% or a minimum of €0.01 or equivalent in funding currency. ²	Integrity Fee for all Mastercard and Maestro Card Types (per Authorisation) ¹ : 0.25% or a minimum of €0.03 or equivalent in funding currency. ²
--	--

¹ The Integrity Fee is applied to all Authorisation requests (excluding Pre-Authorisation requests) failing to meet one or several of the following requirements:

- (i) Transactions must be cleared within 7 days of the Authorisation date.
- (ii) The amount and currency of the processed Transaction must be the same as the associated Authorisation; and/or
- (iii) The processed Transaction must contain the Trace ID provided in the original Authorisation response.

² Details of all currency conversion charges, when applied shall be presented according to the applicable laws with rates provided on a daily basis by the card schemes.

Interchange ++ (IC++) Merchant Service Charges 2.2

Elavon Processing Fee (%):	%	Elavon Processing Fee (per Item): £
----------------------------	---	-------------------------------------

Monetary Pricing Program number if not standard:

Authorisation Fees 2.2.1

An Authorisation Fee of £0.03 per Transaction is payable unless set out otherwise in this section.

Authorisation PP#:	Authorisation fee (per Transaction): £
--------------------	--

Standard Charges 3

Each of the charges set out are (from time to time) applicable to the Agreement, unless and to the extent set out otherwise in the Section “Other Charges”. All charges are quoted exclusive of VAT.

Type	Charge
Minimum Monthly Service Charge (MMSC) ³	£30 per month
Monthly Paper Statement Fee	£3 per month
Chargeback Fee	£25 per retrieval request
Late Payment/Returned Direct Debit Fee	£5 per item
Terminal Recovery Fee	£30 per Terminal
Faster Payments Fee	£0.30 for batch amounts up to £ 1,000,000 / £3.00 for batch amounts over £1,000,000

³ MMSC is payable if your total Merchant Service Charges for a given month is less than the minimum stated. The amount payable is the difference between MMSC and the total MSC paid in that given month.

Secured by Elavon		
Select One	Secured PCI	Secured Pro
Product (£ per month)		
Non-Compliance (£ per month)	40.00	N/A
Custom Value (£ per month)		N/A

Other Charges 4

Charge Type	Per Item	Not Applicable	One Time	Per Occurrence	Monthly	Quarterly	Annually
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Schedule of Fees Partners – UK (Non-CCA)

Blue fields are for internal use only

Terminals 5		
Terminal Type Name	Quantity	Rental Fee (per item)

Dynamic Currency Conversion (DCC) – optional 6	
DCC Rebate (%): %	DCC Service Fee:

Declaration 7

I, the undersigned representative of the Customer warrant and represent that I am duly authorised to and have the power (corporate or otherwise) to bind the Customer to all provisions of this Schedule of Fees.

Signature:	Date (DD/MM/YYYY):
Full Name (Please Print) :	Occupation:

Instruction to your Bank or Building Society to pay by Direct Debit

PLEASE COMPLETE SECTIONS 1 - 4 IN BLOCK CAPITALS USING A BALL POINT PEN -
DO NOT STAPLE FORMS TOGETHER. PLEASE RETURN WITH YOUR COMPLETED
APPLICATION FORM.



1. Name(s) of Account Holder(s)

Originator's Identification Number

9 7 7 3 0 4

2. Bank/Building Society account number

Branch Sort Code

3. Name and full postal address of your Bank or Building Society

To: The Manager

Bank/Building Society

Address

Postcode

4. Signature(s)

Date

Instruction to your Bank or Building Society

Please pay U. S. Bank Europe DAC Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with U. S. Bank Europe DAC and, if so, details will be passed electronically to my Bank/Building Society



Banks and Building Societies may not accept Direct Debit Instructions from some types of accounts

This guarantee should be detached and retained by the Payer.

The Direct Debit Guarantee

This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme, the efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.

If the amounts to be paid or the payment dates change U. S. Bank Europe DAC will notify you within seven working days in advance of your account being debited or as otherwise agreed.

If an error is made by U. S. Bank Europe DAC or your Bank Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.

You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.

Direct Debit Form

Northern Ireland and United Kingdom



U.S. Bank Europe DAC.
Registered in Ireland with Companies Registration Office. The liability of the member is limited. United Kingdom branch registered in England and Wales under the number BR022122.

U.S. Bank Europe DAC, trading as Elavon Merchant Services, is a credit institution authorised and regulated by the Central Bank of Ireland. Authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority. Details about the extent of our regulation by the Prudential Regulation Authority are available from us on request.

