

## SEPA Direct Debit Mandate

<b>Creditor's Identifier</b>	I	E	9	3	Z	Z	Z	3	0	2	7	4	4
------------------------------	---	---	---	---	---	---	---	---	---	---	---	---	---

FOR OFFICE USE ONLY:

<b>Davy Account Reference</b>							
-------------------------------	--	--	--	--	--	--	--

<b>Unique Mandate Reference</b>	
---------------------------------	--

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

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 send this mandate to the creditor.** Please complete all the fields below marked \*

**Account Name\*** \_\_\_\_\_

**Your Address\*** \_\_\_\_\_

**City/Postcode\*** \_\_\_\_\_ **Country\*** \_\_\_\_\_

**Account Number (IBAN)\***

**Swift BIC\***

**Creditor's Name\*** J&E Davy (trading as Davy) \_\_\_\_\_

**Creditor's Address\*** Davy House, 49 Dawson Street \_\_\_\_\_

Dublin 2 \_\_\_\_\_

**Country\*** Ireland \_\_\_\_\_

**Type of Payment** Recurrent

**Date of Signing** \_\_\_\_\_

**Signature(s)** \_\_\_\_\_