

SEPA Direct Debit Mandate

Unique Mandate Reference:

Creditor Identifier:

You will be notified of your Unique Mandate Reference and the Creditor Identifier in your confirmation letter.

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

*Your Name:

*Your Address:

*City/postcode: *Country:

*Account Number (IBAN)

*Swift BIC

Creditors Name: eircom Limited

Creditors Address: 1 Heuston South Quarter
St. John's Road West
Dublin 8
Ireland

Type of payment: Recurrent

*Date of signing:

*Signature:

For Information Purposes:

If you are an existing eircom customer, please insert your account number here

Please complete and return form to:
eircom Limited, Direct Debit Section, PO Box 52, Clonakilty, Co Cork.