

SEPA-Direct Debit Mandate

Authorization to debit payments from bank accounts

Account nr.

1 Contact details

Name / first name

Phone

Street name and number

E-mail

Postal code and city

2 Bank account

Account holder's name

Bank name

BIC

IBAN

3 Validity

The SEPA direct debit mandate generally begins at the earliest possible date and applies to all future recurring payments. If the direct debit mandate is to begin at a later point in time and / or current arrears should also be debited, you can inform us of this by ticking the boxes below.

The direct debit mandate should start on _____

Please debit current payment arrears

3

I hereby authorize SWK Stadtwerke Kaiserslautern Versorgungs-AG with the Creditor identifier: DE68ZZZ00000086627 to auto-debit my account with payments due. At the same time, I authorize my bank to honor automatic payment withdrawals from my account by SWK Stadtwerke Kaiserslautern Versorgungs-AG. I further authorize SWK Stadtwerke Kaiserslautern Versorgungs-AG to reimburse credits to the account below.

Note: I can demand a reversal of a withdrawal within eight weeks, beginning from the date of the automatic payment withdrawal. In that case the terms and conditions agreed to with my bank apply.

Date / location

Signature