



SEPA Direct Debit Mandate

Creditor: **RTÉ Credit Union Ltd.**
Stage 7, Radio Telefís Éireann, Nutley Lane, Dublin 4.

Creditor Identifier: **IE90ZZZ303768**

Mandate Reference:

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

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 fields marked **

Your Name*	
Your Address*	
Swift BIC*	
Account Number - IBAN*	
Type of Payment	Reccurent payment One-off payment
Date of Signing (day/month/year)	
Signature (s)*	
Please return to:	RTÉ Credit Union Ltd.
Creditors Use Only	

DISPERSAL DETAILS:	
Shares	
Loan 1	
Loan 2	
Loan 3	
Budget	
Family Account	
Family Account	
Total	

Frequency Weekly: Fortnightly: Monthly:

Date on which you wish the Direct Debit to be deducted from your bank account: / /20

SEPA Rules require that we provide you with 14 days advance notice of the commencement of your Direct Debit unless an alternate timeline has been agreed upon.

Signed: Date:

Name: Member No.: