

SEPA Direct Debit Mandate

Sinead: IE76ZZZ362414

Creditor Identifier: IE76ZZZ362414

Legal Text: By signing this mandate form, you authorise (A) **Duggan Vet Supplies Ltd.** to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from **Duggan Vet Supplies 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 the fields below marked *

*NAME: _____

*ADDRESS: _____

*COUNTY/CITY: _____ POSTCODE: _____

*COUNTRY: _____

*ACCOUNT NUMBER (IBAN): _____

*SWIFT CODE (BIC): _____

Creditors information:

Name: Duggan Veterinary Supplies Ltd.
Address Line 1: Unit 9, Thurles Retail Park
Town: Thurles
Country: Tipperary
Country: Ireland

TYPE OF PAYMENT - (Please Tick)

Recurrent Once Off Payment

DATE OF SIGNING: _____

SIGNATURES: _____

Please return this mandate to the creditor