

**GORDON HALNON OILS LIMITED T/A HALNON OILS, ANNAGH, GOREY, CO.WEXFORD.**

SEPA Direct Debit Mandate

Unique Mandate Reference:

\*Creditor Identifier: IE47ZZZ304057

Legal Text: By signing this mandate form, you authorise (A) **GORDON HALNON OILS LIMITED T/A HALNON OILS** to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from **GORDON HALNON OILS LIMITED T/A HALNON OILS**.

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:

Address Line 1

Address Line 2

\*City/postcode

\* Country:

\* Account number(IBAN)

\*Swift BIC

\*Creditors Name:

**GORDON HALNON OILS LIMITED T/A HALNON OILS**

\*Creditors Address Line 1: **ANNAGH,**

\*Address Line 2: **GOREY, CO.WEXFORD.**

\*Country:

**IRELAND.**

\*Type of payment Recurrent ☐ **or** One-Off Payment ☐ (Please tick v)

\*Date of signing:

\*Signature

**For Information Purposes only**

Debtor Identification code

Person on whose behalf  
Payment is made

Identification code of Debtor Reference Party

Name of Creditor Reference Party- Creditor must complete this if collecting on behalf of another party

Identification code of Creditor Reference Party

Identification number of the underlying contract

Description of the contract

**Please return this mandate to: GORDON HALNON OILS LIMITED T/A HALNON OILS, ANNAGH, GOREY, CO.WEXFORD.**