

Consent to Debit the Account

I hereby express my consent:

Name and address of the payee <input type="checkbox"/> - resident** <input type="checkbox"/> - non-resident**	Identifier of the payee *										
	<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>										

to debiting the account specified below, under direct debit, with amounts resulting from my obligations on contractual payment dates, in accordance with invoices/bills delivered to me.

Name and address of the payer – account holder										
Account number – payer _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _										
<input type="checkbox"/> - consumer within the meaning of the Civil Code ** <input type="checkbox"/> - other payers **										
Payment identifier***										

This document is also consent to the bank debiting my account, under direct debit, as regards my obligations to the above payee.

.....
(town and date)

.....
(signature of the payer – account holder,
in conformity with the specimen provided to the bank)

For the payee

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For the bank of the payer
 *- 10-digit NIP/NIW of the payee
 **- check the appropriate status
 ***- max. 20 alphanumeric characters