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KA/CLIENT _____
IT NO. _____
IGEL ENTRY _____
DATE, INITIALS _____

..... on
Place *Date*

DIRECT DEBIT AUTHORISATION FOR THE COLLECTION OF RECEIVABLES

Hereby I/we **revocably** authorise you to collect payments payable by me/us when due to the debit of my/our account via direct debit.

OBJECT/TOP NO.:

IBAN **BIC**
(International Bank Account Number): **(bank sort code):**

BANK NAME:

NAME OF ACCOUNT HOLDER:

The payment collection is to start from *[DD/MM/YYYY]*

Thereby also my/our bank managing the account is authorised to honour the collection of these payments, however, the bank is under no such obligation. This is the case in particular if my/our account does not have the requisite cover. I/we have the right to arrange for a reverse booking by my/our bank, without giving any reason, within 8 weeks starting from the day the debit entry was made.

.....
Date and signature of the account holder