

Stadtverwaltung Pirna
 Fachdienst Finanzbuchhaltung
 Am Markt 1/2
 01796 Pirna

SEPA-Direct-Debit-Mandate

Creditor identifier: DE 05 ZZZ 000 000 71756

Name of the debtor(s)

Mandatsreferenz

Accounting number

Creator's name and address: Große Kreisstadt Pirna, Am Markt 1/2, 01796 Pirna

SEPA-Direct-Debit-Mandate

By signing this mandate form, you authorise the citygovernment Pirna to send instructions to your bank to debit your account and your bank to debit your account in accordance with the instructions citygovernment Pirna. 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.

If the account does not have sufficient funds, the custodian financial institution is not obligated to pay. I agree that the given current account can also be used for refunds. I know that the debit immediately is cleared at a chargeback.

Remarks (If you only want the deduction for certain claims, please state on this debit.)

Details of the debtor

Name of the debtor(s)

Type of payment

Street name and number

Postal code and city

account-number IBAN

SWIFT BIC

Before the first SEPA direct debit is collected, we will inform you about the collection in this type of procedure.

Location, Date

Please sign here

If you have any questions about this form, please contact the financial accounting service at finanzbuchhaltung@pirna.de or at +49 3501 556-207.