comforties.com

SEPA DIRECT DEBIT – MANDATE FORM

By signing this mandate form, you authorize **Comforties.com Ltd** (Creditor ID: **DE87ZZZ00002354242**) to send (**recurring/one-off**) direct debit instructions to your bank and your bank to debit your account in accordance with those instructions.

If you disagree with a debit, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank, within **8 weeks** from the date on which your account was debited.

PAYER DETAILS

Company / Name: _____

Address: _____

Postcode / City / Country: _____

Email: _____ Phone: _____

BANK DETAILS

IBAN: _____

BIC: _____

Account holder name (if different): _____

MANDATE DETAILS

Payment type: ☐ *Recurring* ☐ *One-off*

Customer no. / Reference: _____

Mandate reference (by creditor): _____

Start date first debit: _____

Creditor: **Comforties.com Ltd**

Creditor address: **Parizhka Komuna 26, fl.9, 9000 Varna, Bulgaria**

Creditor email: **info@comforties.com**

SIGNATURE

Place, date: _____ Signature: _____

Privacy: *Your data is used only to process payments and our administration, in line with our privacy policy.*
Submit: *Email the signed form to info@comforties.com*