SEPA Direct Debit Mandate SAN number _ _ _ _ _ _ Creditor Identifier: IE95ZZZ304260 Legal Text: By signing this mandate form, you authorise (A) Batch Ltd to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from Batch Ltd. 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 you 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 Address Line 1 ______ *Your Address: Address Line 2 ______ Address Line 2 *City/postcode * Country *Sort Code Account N * IBAN *Swift BIC Creditors Information: Batch Ltd Accounts Department 6 Bell Yard Westminster London WC2A 2JR *Type of payment Recurrent One-Off Payment (Please tick v) *Date of signing: *Signature(s) Please return this mandate to the creditor