*Your name and address:	
Your account number:	Your phone number:

SEPA Direct Debit mandate form

Please complete and sign this form, detach at the perforation, seal to form a confidential envelope and return to us.

CUSTOMER DETAILS - Please complete all fields marked with*

Creditor name and address: Bord Gáis Energy, One Warrington Place, Dublin 2.

Creditor identifier: IE43SDD300249

Unique Mandate Reference to be completed by Bord Gáis Energy:

Please fill in using black ink, BLOCK letters.

BANK/BUILDING SOCIETY DETAILS		
*IBAN	*BIC	
	Type of payment: Recurrent Payment	
*Date		
*Bank or Building Society account name:	*Signature 1:	
	*Signature 2:	

*By signing this mandate form, you authorise (A) Bord Gáis Energy to send instructions to you bank to debit your account and (B) your Bank to debit your account in accordance with the instruction from Bord Gáis Energy. 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.

Note: Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.

Please return to: Gáis Energy, PO Box 10943, Dublin 1.