**REFUSE SEPA DIRECT DEBIT PAYMENT**

Date: ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

To

The Cyprus Development Bank Public Company Ltd (“the Bank”)

|  |  |  |  |
| --- | --- | --- | --- |
| Refuse execution of **next** SEPA Direct Debit | | | |
| Amount: | ***€*** | Payment Date: |  |
| Refuse execution of **all** SEPA Direct Debits | | | |

**Notes:**

1. By refusing the execution of the next SEPA Direct Debit, I/we authorise the Bank not to proceed with the execution of the next payment only. All subsequent payments will be processed as normal. This instruction will be applied solely against the Mandate Reference specified below.
2. By refusing the execution of all SEPA Direct Debits and until the revocation of the said instruction by me/us, I/we authorise the Bank not to proceed with the execution of all payments for the Mandate Reference specified below.

|  |  |
| --- | --- |
| **DIRECT DEBIT INFORMATION** | |
| **1. Mandate Reference** |  |
| **2. Name and Creditor ID of Beneficiary-Creditor** |  |
| 3. ΙΒΑΝ of the account of the Debtor |  |

|  |  |
| --- | --- |
| **APPLICANT-ACCOUNT OWNER INFORMATION** | |
| **Name:** | |
| **Identity Card/Passport/**  **Registration No.:** | **CIF Account Owner Νο.:** |

| **SIGNATURES** |
| --- |
| …………………………………….…… …………………………  Applicant-Account Owner Signature Date |

|  |  |
| --- | --- |
| **FOR BANK’S INTERNAL USE** | |
| Input by: |  |
| Name: ................................................................................................ | Date: …………………… |
| Signature: ……………………………………………. |  |
| Checked by: |  |
| Name: ................................................................................................ | Date: …………………… |
| Signature: ……………………………………………. |  |