

Continuous authorization

For standard European direct debit (SEPA)

Explanation

With this form, you grant Eneco Zakelijk B.V. a continuous authorization for automatic direct debit. Please complete the form in full. Without your signature, we cannot process the requested change.

To be completed by you

Company name

Account number
(see your invoice)

Address

Postal code and city

Telephone number

Name of authorized signatory

Incassant ID: **NL24ZZZ242961680000**

IBAN

BIC

- By signing this form, you authorize Eneco Zakelijk B.V. to send continuous debit instructions to your bank to withdraw amounts from your account, and you authorize your bank to process these withdrawals in accordance with Eneco Zakelijk B.V.'s instructions.
- This authorization applies only to direct debit transactions. After a withdrawal, you have the right to request a refund within 8 weeks. Please consult your bank for conditions.
- By signing, you declare that you are the authorized representative(s) of the above mentioned bank account. Withdrawal of authorization must be submitted in writing to Eneco Zakelijk B.V. in a timely manner.

Signature

City

Date

**Signature of
authorized signatory**

Please send the completed and signed form by email to your contact person. The email address can be found at the top right of your invoice. Questions? Chat with us via eneco.nl/zakelijk.

