SEPA DIRECT DEBIT MANDATE



| Unique Mandate Reference (UMR) to be completed by Digiwe | b Limited |
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By signing this mandate form, you authorise (A) Digiweb Limited to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from Digiweb Limited

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.

Please complete all the fields marked *.

| Your Name | * |
|---|---|
| Your Address | |
| | * |
| City | * |
| Post Code | * |
| Country | * |
| | |
| Your IBAN * | |
| | |
| Debtor bank identifi er code - BIC | * |
| Creditor's name | Digiweb Limited |
| Creditor identifier | IE84ZZZ303197 |
| Creditor address | Unit 1 College Business & Technology Park |
| | Dublin |
| City | Dublin 15 |
| Post Code | Ireland |
| Country | |
| Type of payment | Recurrent payment or One-off payment |
| Date of signature | * D D M M Y Y |
| | Signature(s) |
| | |
| Please sign here | |
| Note: Your rights regarding the above Please send this mandate to the credit | mandate are explained in a statement that you can obtain from your bank. or. |
| Vour Digiwoh Account Number | |
| Your Digiweb Account Number | |
| Your Email Address: | |
| Your Phone Number: | |

RETURN TO:

Digiweb Ltd, Unit 1 College Business & Technology Park, Blanchardstown Road North, Dublin 15, or by email on: customercare@digiweb.ie For queries call: 1890 945 400