

## Form 8: SEPA Business-to-Business Direct Debit Mandate

Please fill in the form in **block letters**, complete **all mandatory fields marked with asterisk (\*)**, and send the signed document to [accounting@prisma-capacity.eu](mailto:accounting@prisma-capacity.eu). We will confirm receipt of the form and set-up the mandate with our payment provider.

<b>Mandate reference</b> (to be completed by PRISMA)	
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### Debtor Details

Complete Company Name	
Address	
Postal Code and City	
Country	
VAT	
IBAN	
BIC	
Name of Credit Institute	

### Creditor Details

<b>PRISMA European Capacity Platform GmbH</b> DE13ZZZ00002049539 Reichsstraße 1-9 04109 Leipzig GERMANY
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By signing this mandate form, you authorise (A) PRISMA European Capacity Platform GmbH to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from PRISMA European Capacity Platform GmbH.  
 This mandate is only intended for business-to-business transactions. You are not entitled to a refund from your bank after your account has been debited, but you are entitled to request your bank not to debit your account up until the day on which the payment is due. Please contact your bank for detailed procedures in such a case.

Signature of form initiator	
Place and Date*	
Full Name*	
Signature*	

Type of payment
Recurrent payment
One-off payment