European SEPA Direct Debit Mandate

For recurring debit

Core

Creditor name: AirPlus International
Creditor ID: BE44ZZZ0883523807
66 Boulevard de l'Impératrice
B-1000 Brussels
Belgium

To be filled out by AirPlus International

Client ref. C H

Mandate ref.

Your Client and mandate references will be communicated on your monthly statement(s).

1. Debtor identification

By signing this mandate form, you authorise A) AirPlus International (identification number BE44ZZZ0883523807) to send instructions to your bank to debit your account and B) your bank to debit your account in accordance with the instructions from AirPlus International for the recurring debit of the statements of expenses made with the Mastercard EU Charge Card, issued for:

☑ Payment by Personal Bank Account

First name

Last name

2. Debtor information

Street

House number   Box

ZIP Code   Place

Country

Bank account number (IBAN code) :

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BIC Code

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.

Signature

Date D D M M Y Y Y Y   Place

Please join:
- For Belgian residents, copy (both sides) of valid Belgian ID.
- For all others, copy (both sides) of valid EU Identity card or valid international passport.

Please fill out this document and send it together with your copy of ID/passport to:
AirPlus International NV/SA - Customer Service, Keizerinlaan 66 Boulevard de l'Impératrice, B-1000 Brussels, Belgium
europeaninstitutions.BE@airplus.com

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