

SEPA DIRECT DEBIT PAYMENT DISBURSAL

Member Number: _____

Member Name: _____

Member Address: _____

Phone Number: _____ Email Address: _____

DISBURSAL DETAILS

Please enter your payment details below if you are making payments to one or more accounts:

Main Member Accounts:

Share Account:

Amounts:

Regular Saver Account:

Budget Account:

Loan Type 1: _____

Loan Type 2: _____

1st Family A/C No.: _____

Share Account:

2nd Family A/C No.: _____

Share Account:

TOTAL AMOUNT:

Preferred Collection Date: ____/____/____ Weekly ☐ Fortnightly ☐ Monthly ☐

Upon receipt of this form by the credit union it may take up to 10 working days to set up a new direct debit, please allow this time.

I/We agree to notify the credit union in writing if I/We wish to cease the direct debit payment to the credit union.

Signature(s): _____ Date: _____

First Tech Credit Union Ltd. is regulated by the Central Bank of Ireland