

Prof. E.M. Meijerslaan 2 - 1183 AV Amstelveen Postbus 2311 - 1180 EH Amstelveen www.pensioenfondspgb.nl

CONTINUOUS SEPA AUTHORISATION FOR AUTOMATIC PAYMENT

With this form you authorise us to make automatic payments of pension contributions. We will use these contributions for the accrual of your employees' pension.

What should I do with this form?

- 1. Fill out the form completely.
- 2. Sign the form below.
- Send this form by email to : relatiebeheer@pensioenfondspgb.nl Or by post to : Pensioenfonds PGB Relatiebeheer

Postbus 2311

- 1180 EH Amstelveen
- 4. Register your authorisation details with your bank.

Do you choose direct debit?

Then we will debit the contribution at a fixed moment every month. This way you will always pay your invoices on time. You will also avoid extra administration costs of € 2.50 per debit.

I authorise the debiting of funds from my account

- □ Yes, I give permission to:
 - Pensioenfonds PGB to send direct debit orders to my bank on a continuous basis.
 - my bank to debit an amount from my account on behalf of Pensioenfonds PGB on a continuous basis.
- □ Yes, I give Pensioenfonds PGB permission to automatically debit the outstanding invoices.
- □ No, I will transfer the amounts to Pensioenfonds PGB myself. I will use the following details:

Chamber of Commerce and VAT number in order to add Pensioenfonds PGB as a business relation

Our Chamber of Commerce number is 41198535. Because we are a foundation, we are not subject to VAT. Do you still need a VAT number? For instance, because you need to enter this into your administration? Then you can use NL8016.51.025.B01

These are the characteristics by which I recognise the write-offs

Name	: Pensioenfonds PGB
Debit ID	: NL14ZZZ411985350000

These are my contact details

Company name	:
Client number	:
Business address	:
Postal code and city	:

These are my bank details

IBAN	:	
In the name of	:	

I have filled in my answers truthfully

If I disagree with a payment, I can issue a chargeback. I will arrange this with my bank.

Initials and surname	:
E-mail address	:
Telephone number	:

Date and location

Signature