



SEPA DIRECT DEBIT MANDATE

I hereby authorise BDAE Holding GmbH, in turn authorised by BDAE Expat GmbH for contract management and collection, to collect payments owed by me from my account by means of direct debiting.

At the same time, I instruct my financial institution to honour direct debits drawn by BDAE Holding GmbH for the insurer.

Collection shall be identifiable on the basis of the Creditor Identifier DE23ZZZ00000131378 and the personal mandate reference number shown in the confirmation of cover. Depending on the chosen payment method, collection shall take place on the 1st day of each month.

Please note: I shall be entitled to request the refund of the debited amount within a term of eight weeks commencing on the date of debiting. In this context, the terms and conditions agreed upon with my financial institution shall apply.

In the event that the funds on my account are insufficient, the financial institution in charge of my account shall not be obliged to honour the direct debit. Partial payments shall be excluded from direct debiting procedures.

In addition, the following regulations shall apply:

• Depending on the payment method elected below, the total amount shall be paid in advance in each case.

The person owing the premiums shall, towards the policyholder, be the person entitled to be insured and, towards the insurer, the policyholder.

- The premium shall be due for payment after receipt of the confirmation of cover, but in no case later than as to the inception date. I am aware that the policyholder will refrain from registering or will deregister the aforementioned persons as insured persons with the insurer if the amount to be paid, inclusive of ancillary costs, fails to be paid or to be paid completely for reasons the person entitled to be insured is to be made responsible for. I am aware that no insurance coverage shall exist in such case.
- In the event that the person paying the premium is not identical with the person entitled to be insured / the insured person, the person entitled to be insured / the insured person shall be obliged to give the premium-paying person notice of the rendered information.
- Advance information on the collection of the owed amounts shall be given in the confirmation of cover addressed to the person entitled to be insured. In this context, the premium amounts, the due dates, the Creditor Identifier and the mandate reference number shall be indicated.

Applicable to premiums as from (dd/mm/yyyy)							
Information on the person paying the premium	Surname					Sex	□m □f
	First name(s)						
	Complete Address						
	Phone						
	IBAN						
	BIC/SWIFT			Bank			
	Payment method	annually	t	twice a year (+ 2 %)		monthly (+ 5 %)	
Information on the insured person	Surname (if different from the person paying the premium)					Sex	□m □f
	First name(s) (if dif- ferent from the person paying the premium)						
	Date of birth (dd/ mm/yyyy)		Insurance number(s) (if available)				

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Signature of Account Holder