Tax office	Creditor identifier DE502000000062119	Only for federal state Mecklenburg-Western Pomerania
SEPA Direct Debit Mandate		
By signing this mandate form, you authorise the competent tax authority (creditor) to send instructions to your bank to debit your account and your bank to debit your account in accordance with the creditor's instructions. 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.		
Account holder		
Name                 Street name and number		
Postal code         Town or city		
Country		
IBAN (International Bank Account Number)	No savings accounts, pleas	
BIC (Business Identifier Code)	Name of bank	D D M M Y Y Y Date of signature
Signature(s) of account holder(s)		
Participants in the SEPA direct debit scheme are required to agree to the following and provide the following information:		
<ul> <li>To facilitate payment transactions, the applicable pre-notification period is one day before the payment is debited. Pre-notification is</li> </ul>		
<ul><li>not necessary for payments debited on the basis of tax returns.</li><li>The mandate reference number will be provided in the tax assessment notice, a separate letter and/or a bank statement.</li></ul>		
Tax number		
If different from account holder details provided	above:	
Name of taxpayer(s) This direct debit mandate is valid for all payments to be made under the above tax number.		
or This direct debit mandate is only valid for the following payments to be made under the above tax number,		
including ancillary tax payments and follow	-up taxes:	
Income/corporation tax     excluding final payments       VAT     excluding final payments		
Wages tax		
Income tax and amounts withheld under section 50a of the Income Tax Act		
The above account will also be used for tax refunds.		
Signature(s) of taxpayer(s) and, if different, of account holder(s):		
Signature(s) of taxpayer(s)	If different, signature(s)	of account holder(s)