

## AGROLAB LUFA GmbH

Dr.-Hell-Str. 6, 24107 Kiel, Germany  
Tel.: +49 431 1228-0, Fax: +49 431 1228-498  
[lufa@agrolab.de](mailto:lufa@agrolab.de) [www.agrolab.de](http://www.agrolab.de)



### SEPA Direct Debit Core mandate (for retail customers)

Dear Customer,

Thank you for taking advantage of the SEPA Direct Debit option.  
Before completing the form, please ensure that you have selected the right form (either B2B or retail client).

Please ensure that all of your information is entered in the form! Please use your customer number as the mandate reference. Of course, your information will be treated in confidence!

Unfortunately, we are not able to accept incomplete SEPA mandates.

Please send the signed original copy of the SEPA Direct Debit Gare mandate to the following address:

AGROLAB LUFA GmbH  
c/o Agrolab GmbH  
Accounting Department  
Jenaer Str. 1  
84034 Landshut

We look forward to working with you, and thank you for your cooperation.

Do not hesitate to contact us if you have any questions regarding the Direct Debit authorisation.

Sincerely,

AGROLAB LUFA GmbH  
Accounting Department

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## SEPA Direct Debit Core Mandate

Payee:

AGROLAB LUFA GmbH  
Dr.-Hell-Str. 6  
24107 Kiel  
Germany

**Financial accounting**

*Payer:*

I/We hereby authorise the above payee to withdraw payments from my/our account by way of direct debit transactions. At the same time, I/we instruct my/our bank to cash direct debit transactions that are drawn from my/our account by the aforementioned payee.

Payment type: Recurring payment

Please note: I/We may request a refund of the debited amount within a period of eight weeks, beginning on the date on which the amount was debited. The terms that have been agreed with my/our bank shall apply.

Creditor 1D number: [DE57ZZZ00000375982](#)

Mandate reference:

_____ Surname, first name (account holder)	_____ Name of bank
_____ Street address	_____ BIC
_____ Post code and town	_____ IBAN
_____ Country	
_____ e-mail address (to send out pre-notifications)	

I/We agree that the pre-notification period may be deduced to one day.

.....  
Place Date Signature

AG Kiel  
HRB 5796  
Ust/VAT-Id-Nr.:  
DE 813 356 511

Geschäftsführer  
Dr. Paul Wimmer  
Dr. Stephanie Nagorny

