

Billing Information Details Form

Please fill in the form below and send the signed form
by e-mail to BillingContacts@Ebaclearing.eu

| Participant Information | |
|---------------------------------|--|
| Participant Name ¹⁾ | |
| Applicable BIC(s) ¹⁾ | |

| Participant billing details | |
|----------------------------------|--|
| Department | |
| Street or P.O. Box ¹⁾ | |
| Additional address details | |
| Postal code ¹⁾ | |
| City ¹⁾ | |
| Country ¹⁾ | |
| VAT no. ¹⁾ | |

| Main billing contact details | |
|------------------------------|--|
| Contact name ¹⁾ | |
| Telephone ¹⁾ | |
| Mobile | |
| E-mail ^{1) 2)} | |

| Back up billing contact details | |
|---------------------------------|--|
| Contact name ¹⁾ | |
| Telephone | |
| Mobile | |
| E-mail ^{1) 3)} | |

- 1) Mandatory field
- 2) This e-mail address will be used to send all your remittances by e-mail.
- 3) Can be a generic e-mail address

Please choose at least one service / entity to which the above mentioned details apply:

| Services | Please select | Entity | Please select |
|-----------------------------|--------------------------|------------------------------|--------------------------|
| EBA CLEARING EURO1/STEP1 | <input type="checkbox"/> | Euro Banking Association | <input type="checkbox"/> |
| EBA CLEARING STEP2 SCT | <input type="checkbox"/> | PRETA | <input type="checkbox"/> |
| EBA CLEARING STEP2 SDD CORE | <input type="checkbox"/> | PRETA Open Banking Europe | <input type="checkbox"/> |
| EBA CLEARING STEP2 SDD B2B | <input type="checkbox"/> | | |
| EBA CLEARING STEP2 CC | <input type="checkbox"/> | | |
| SEDA | <input type="checkbox"/> | | |
| INSTANT PAYMENTS | <input type="checkbox"/> | | |

In order to be able to offer you a smooth payment process, we would kindly ask you to opt for a direct debit and complete the SEPA direct debit mandate available on our respective websites:

| Preferred method of payment | |
|-----------------------------|--------------------------|
| SEPA Direct Debit B2B | <input type="checkbox"/> |
| SEPA Direct Debit CORE | <input type="checkbox"/> |
| SEPA Credit Transfer | <input type="checkbox"/> |

Please fill in below to establish / update us with your PIN ref:

| Provider Identification Number (PIN) | |
|--------------------------------------|--------------------------|
| EBA CLEARING S.A.S. | <input type="checkbox"/> |
| PRETA S.A.S. | <input type="checkbox"/> |
| EBA (Association) | <input type="checkbox"/> |

*In case the above entities are not yet registered with your institution, you may provide us with your enrollment / certification process form via our secured website : www.ebaclearing.eu > Customer Support > ICU Web Form **

() Access is granted to all your registered Billing contacts.*

| Bank account details for refund | |
|---------------------------------|--|
| IBAN ¹⁾ | |
| SWIFT BIC ¹⁾ | |

| Signature(s) ¹⁾ | | | |
|----------------------------|--|-----------|--|
| Name | | Name | |
| Function | | Function | |
| Date | | Date | |
| Signature | | Signature | |

1) Mandatory field

How to set / update Billing contact details?

Your Billing contacts may provide us with your latest Billing Information Details using this form, including:

a) Billing contacts, b) Billing address, c) settlement method d) bank details etc.

Registered Billing contacts in your company are responsible to provide with latest and updated information using the [Billing Information Details form](#).

Failure to comply may result in missing or erroneous invoices possibly addressed to outdated Billing contacts or even lead to unpaid invoices and penalty fees.

How to set / update the banking details for an established Direct Debit?

Your Billing contacts may provide us with your latest SEPA Direct Debit Mandate using this form, including:

a) Mandate reference, b) Debtor name, c) address and d) account number etc.

Registered Billing contacts in your company are responsible to provide with latest and updated information using the [SEPA Direct Debit Mandate form](#).

Failure to comply may result with unpaid invoice notifications, chasers or penalty fees.

Accounting information:

The SEPA Direct Debit Mandate form is available from all EBA CLEARING/EBA/PRETA websites and should be sent

a) By post, to EBA CLEARING/EBA/PRETA – Accounting services, 40, rue de Courcelles 75008 Paris France.

b) Online, to EBA CLEARING/EBA/PRETA - via the secured ICU Web Form.

c) Original, to your bank for approval and to avoid rejections i.e. reject code MD01

More information: www.ebaclearing.eu > *Customer Support* > [Billing and payment information](#)

*Have a question ? Ask us using our secured ICU Web Form: www.ebaclearing.eu > *Customer Support* > [ICU Web Form](#)*