

| Sprememba Amendment | | SOGLASJE za B2B direktno obremenitev SEPA SEPA Business-to-Business Direct Debit Mandate | | | | | | | | | | NAZIV IN LOGOTIP PREJEMNIKA PLAČILA CREDITOR'S NAME & LOGO | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|---|--|---|--|----|--|
| | | Referenčna oznaka soglasja - izpolni prejemnik plačila Mandate reference - to be completed by the creditor | | | | | | | | | | | | | | | |
| Ukinitev Cancellation | | S podpisom tega obrazca pooblašate (A) (NAZIV PREJEMNIKA PLAČILA), da posreduje navodila vašemu ponudniku plačilnih storitev za obremenitev vašega plačilnega računa in (B) vašega ponudnika plačilnih storitev, da obremeni vaš plačilni račun v skladu z navodili, ki jih posreduje (NAZIV PREJEMNIKA PLAČILA). To soglasje velja samo za B2B transakcije. Na podlagi tega soglasja nimate pravice do povračila denarnih sredstev za že izvršene direktne obremenitve, lahko pa do dneva valute od vašega ponudnika plačilnih storitev zahtevate, da ne obremeni vašega računa. Prosimo izpolnite polja, označena z *. By signing this mandate form, you authorise (A) (NAME OF CREDITOR) to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from (NAME OF CREDITOR). This mandate is only intended for business-to-business transactions. You are not entitled to a refund from your bank after your account has been debited, but you are entitled to request your bank not to debit your account up until the day on which the payment is due. Please complete all the fields marked *. | | | | | | | | | | | | | | | |
| Vaše ime in priimek/naziv Your name | | Ime in priimek plačilnika(-ov)/naziv Name of the debtor(s) | | | | | | | | | | 1 | | | | | |
| Vaš naslov Your address | | Ulica in hišna številka/sedež Street name and number | | | | | | | | | | 2 | | | | | |
| | | Poštna številka Postal code | | | | | | | | | | 3 | | | | | |
| | | Kraj City | | | | | | | | | | 4 | | | | | |
| | | Država Country | | | | | | | | | | 5 | | | | | |
| Št. vašega pl. računa Your account number | | Številka plačilnega računa - IBAN (19 znakov) Account number - IBAN (19 characters) | | | | | | | | | | 6 | | | | | |
| | | Identifikacijska oznaka banke (SWIFT BIC) SWIFT BIC | | | | | | | | | | 7 | | | | | |
| Naziv prejemnika plačila Creditor's name | | Naziv prejemnika plačila Creditor name | | | | | | | | | | 8 | | | | | |
| | | Identifikacijska oznaka prejemnika plačila Creditor Identifier | | | | | | | | | | 9 | | | | | |
| | | Ulica in hišna številka/sedež Street name and number | | | | | | | | | | 10 | | | | | |
| | | Poštna številka Postal code | | | | | | | | | | 11 | | | | | |
| | | Kraj City | | | | | | | | | | 12 | | | | | |
| | | Država Country | | | | | | | | | | 13 | | | | | |
| Vrsta plačila Type of payment | | Period. obremenitev Recurrent payment | | | | | | | | | | ali or | | Enkratna obremenitev One-off payment | | 14 | |
| Kraj podpisa soglasja City or town in which you are signing | | Kraj Location | | | | | | | | | | Datum * Date | | D D M M L L | | 15 | |
| Prosimo podpišite tukaj Please sign here | | Podpis(-) Signatures | | | | | | | | | | | | | | 16 | |

Podrobnosti, ki se nanašajo na razmerje med prejemnikom plačila in plačnikom - samo v informacijo.
Details regarding the underlying relationship between the Creditor and the Debtor - for information purposes only.

| | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|----|--|
| Identifikacijska oznaka plačnika Debtor identification code | | Vpišite katero koli številčno oznako, za katero želite, da jo navede vaš ponudnik plačilnih storitev. Write any code number here which you wish to have quoted by your bank. | | | | | | | | | | 14 | |
| Oseba, v imenu katere se izvrši plačilo Person on whose behalf payment is made | | Naziv dobznika: če izvajate plačilo v skladu s pogodbo med (NAZIV PREJEMNIKA PLAČILA) in drugo osebo (npr. kjer plačujete račune drugih oseb), tu kaj prosimo vpišite ime in priimek druge osebe. Če plačujete v svojem imenu, pustite prazno. Name of the Debtor Reference Party: if you are making a payment in respect of an arrangement between (NAME OF CREDITOR) and another person (e.g. where you are paying the other person's bill) please write the other person's name here. If you are paying on your own behalf, leave blank. | | | | | | | | | | 15 | |
| Stranka za katero prejemnik plačila zbira plačila Party on whose behalf the Creditor collects the payment | | Identifikacijska oznaka dobznika Identification code of the Debtor Reference Party | | | | | | | | | | 16 | |
| | | Naziv upnika: prejemnik plačila mora izpolniti to polje, če izvršuje direktne obremenitve v imenu druge stranke Name of the Creditor Reference Party; Creditor must complete this section if collecting payment on behalf of another party. | | | | | | | | | | 17 | |
| | | Identifikacijska oznaka upnika Identification code of the Creditor Reference Party | | | | | | | | | | 18 | |
| V skladu s pogodbo In respect of the contract: | | Identifikacijska številka osnovne pogodbe Identification number of the underlying contract | | | | | | | | | | 19 | |
| | | Opis pogodbe Description of contract | | | | | | | | | | 20 | |

Prosimo vrnite:
Please return to:
XX
XX

Le za uporabo prejemnika plačila
Creditor's use only
XX
XX