

Instruction to your bank to pay by direct debit

Unfortunately, this payment option is not available to **PostFinance** account holders. Please complete this form in BLOCK CAPITALS.

| LSV identification $egin{array}{ c c c c c c c c c c c c c c c c c c c$ | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Name(s) of account holder(s) | | | | | | | | | | | | | | |
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| Account holder(s) address | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| Country | | | | | | | | | | | | | | |
| Bank account number | | | | | | | | | | | | | | |
| IBAN | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Name and full postal address of your bank: | | | | | | | | | | | | | | |
| Bank name | | | | | | | | | | | | | | |
| Bank address | | | | | | | | | | | | | | |
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| Post code | | | | | | | | | | | | | | |

Instruction to your Bank

Please pay Allianz Care Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. The amounts may vary and may be debited on various dates. I understand that this instruction may remain with Allianz Care and if so details will be passed electronically to my Bank. In the event of a query, debited amounts are refundable upon request, up to 30 days after the transaction occurs.

| Signatu | re(s) | | | | | | | | | | | | | | | | | |
|---------------|-------|-------|-----|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Print name(s) | | | | | | | | | | | | | | | | | | |
| Date | D D | 1 M / | / Y | ΥY | | | | | | | | | | | | | | |

We care about your personal data protection.

 $To \ read \ our \ Data \ Protection \ Notice, visit: {\color{blue} www.allianzcare.com/en/privacy.html}$

This guarantee should be detached and retained by the payer

The Direct Debit Guarantee

This guarantee is offered by all Banks that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank. If the amounts to be paid or the payment dates change, Allianz Care will notify you 10 working days in advance of your account being debited or as otherwise agreed. If an error is made by Allianz Care or your Bank, you are guaranteed a full and immediate refund from your branch of the amount paid. You can cancel a Direct Debit at any time by writing to your Bank. Please also send a copy of the letter to us at the address below.

Please complete, sign and send this form to your bank. Please also send us a copy by email: client.services@e.allianz.com

or by post: Allianz Care, 15 Joyce Way, Park West Business Campus, Nangor Road, Dublin 12, Ireland.