



Laois County Council

HOUSING LOANS

Standing Order Set Up Form

DATE (DD/MM/YYYY)

□□/□□/□□□□

TO: THE MANAGER

(BANKS NAME)

(BANKS ADDRESS)

I/We hereby authorise and request you to DEBIT my/our account

Sender NSC

□□-□□-□□

Sender Account Number

□□□□□□□□

Sender Account Name

□□□□□□□□□□□□□□□□

with the amount of

Amount in words

€

and to CREDIT

Receiver Account Name

LAOIS COUNTY COUNCIL COUNTY FUND ACCOUNT

Receiver IBAN Number

IE16AIBK93327911556608

Receiver BIC Number

AIBKIE2D

Receiver Reference (To show on Receiver's statement)

ENTER YOUR CUSTOMER NUMBER HERE / LOANS

Please Allow 5 Working Days Prior to First Payment

Start Date (DD/MM/YYYY)

□□/□□/□□□□

Frequency (please **X** box)

Weekly Fortnightly Monthly

Until Further Notice

(please **X** box if applicable)

Final Payment Date (DD/MM/YYYY)

□□/□□/□□□□

No of Payments

or

X

SIGNATURE

X

SIGNATURE