



Cork County Council Standing Order Form
RATES
 Collection Department
 Cork County Council
 Tel: 021 4285252

To: THE MANAGER
 Bank: _____
 Address: _____

Date (DD/MM/YYYY)

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I/We hereby authorise and request you to debit my/our account number:

<i>Sender IBAN Number</i>	<i>Sender BIC</i>

With the amount of € (say) (Amount in words)

And to credit Cork County Council's account number.

Bank Branch: AIB Bank, 66 South Mall, Cork
Account Number 70405135
BIC AIBKIE2D
IBAN Number IE13 AIBK 9341 7870 4051 35

Please allow 5 Working Days prior to First Payment

Start Date (DD/MM/YYYY): Frequency (please tick whichever applies)

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Weekly Fortnightly Monthly

Until Further Notice (Please X box) **OR** Final Payment Date (DD/MM/YYYY):

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Please quote Rates Account Number with each payment as follows

Rates Account Number

								R	A		
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It shall be understood that the bank shall not be under any liability for damage or loss caused by any omission to make these payments

NAME _____
 ADDRESS: _____

 SIGNED: _____

Completed Form to be sent to your Bank

Privacy & Data Protection:
 Personal information is collected by Cork County Council to facilitate the Levying and Collection of County Rate. Legally we can process this information in the exercise of official authority vested in Cork County Council. The protection of your personal data is a key priority for the Council and your data will be processed in line with our Privacy policy which is available at <https://www.corkcoco.ie/Privacy-Policy> or hardcopy from our offices at County Hall, Carrigrohane Road Cork, Ireland. Should you have any questions about our Privacy policy or the information we hold about you please contact us by email to dpo@corkcoco.ie or write to the Data Protection Officer, Cork County Council, County Hall, Carrigrohane Road Cork, Ireland.