



**Cork County Council Standing Order Form**  
**HOUSING LOAN**  
 Cork County Council Tel: 021 4285262

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:

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*Borrowers Bank Account Number* *Borrowers Bank Sort Code*

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: 80919877**  
**BIC: AIBKIE2D**  
**IBAN: IE27 AIBK 9341 7880 9198 77**

**Please allow 5 Working Days prior to First Payment**

Start Date (DD/MM/YYYY):  

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Frequency (please tick whichever applies)  
 Weekly  Fortnightly  Monthly

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

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**Please quote Housing Loan account number with each payment as follows**

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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: \_\_\_\_\_  
 DATE: \_\_\_\_\_