



MAST COMPENSATION PAYMENT INSTRUCTION FORM

ESB requires the information requested on this application to enable us to set up and manage your MAST Compensation. The data controller is the ESB Networks. Please refer to our privacy policy at <https://esbnetworks.ie/privacy>

Please complete this form authorising ESB Networks payments be made directly to your bank account. Payments can only be made to Irish Bank and Credit Union accounts at present.

1. BANK DETAILS

I hereby authorise ESB Networks to make any payments to me under the above scheme by Direct Debit to the following Bank Account. The details requested in this section are all contained on your Bank Statement

Bank Name (Irish Bank and Credit Union)

Bank Address

Account Name

Bank Account No

Bank Sort Code

BIC*

IBAN*

Note: *IBAN and BIC are available on your bank statement or from your bank.

2. DECLARATION

The authority will remain in force until revoked or amended by me.
The Grantor Reference Number is shown on your remittance advice.
The Grantor Number always begins with the letter G followed by five digits

Grantor Reference No (for existing customers only)

Name: (in block capitals)

Address

Signature:

Date:

Contact Number:

3. INSTRUCTIONS

Completed forms may be returned in the enclosed Freepost envelope to:
Mast Administration, ESB Networks Ltd, PO Box 29, Garrycastle, Athlone, Freepost, Co Westmeath, Ireland.

Note:

Payment in accordance with these instructions shall discharge ESB Networks from any further liability. ESB Networks shall not accept responsibility in the event that the bank account details submitted by you are incorrect.

FOR INTERNAL USE ONLY

Input by: _____ Date: _____ Checked by: _____ Date: _____