

Bank data form

Surname and first name of the author		
Address		
Fiscal residence (nation)		
Date of birth	Phone	E-mail

1. I herewith authorize AKM / austro mechana to transfer all payments accrued to me to my bank account with discharging effect of the debt until further written notice is made.

IBAN _____ BIC _____

at (Bank Name) _____

Bank Address _____

Important note:

We can't recognize bank accounts which are not made out in the name of the right holder. All previous dispositions have herewith become invalid.

2. I acknowledge that AKM/ austro mechana will take the above mentioned address as a basis for all assessments and decisions regarding tax and foreign exchange issues. I will immediately inform AKM / austro mechana in writing if this address is not applicable and valid for such matters.

3. I am familiar with the restrictive provisions in § 11 of the AKM Statutes regarding the assignment or pledging of royalties.

4. I am assessed for Value Added Tax in Austria or in an EU member state: Yes No

VAT Number _____

5. I acknowledge that postal delivery of distribution documents is charged with a contribution towards expenses of EUR 1.60 (plus 20% tax) per letter and recipient. I can change this setting to e-mail distribution in the web services at any time.

6. I shall immediately notify AKM / austro mechana in writing of any change of my above personal information.

_____, _____, _____
 Place Date Signature / Company's stamp