

## Commercial Cards - Authorised Signatory/Verifying Officer Nomination Deletion Form

Complete this form to nominate a person(s) to be an Authorised Signatory and/or Verifying Officer for your Corporate, Purchasing and Employee Benefits Card facility.

Each nominated person must read the Roles and Responsibilities for Authorised Signatories and Verifying Officers prior to completing this form.

### Section 1 – Organisation Details

Organisation name

Facility Number

ABN/ACN Number

### Section 2 – Authorised Signatory Required To Act On The Facility

Please nominate the number of Authorised Signatories required to act on the facility

1 Authorised Signature

2 Authorised Signatories

### Section 3 – Authorised Signatory/Verifying Officer Details

An Authorised Signatory/Verifying Officer must be fully identified, as per the identification and verification (IDV) standards for an individual, by the Bank before acting as an Authorised Signatory and/or Verifying Officer

Please tick (✓) the appropriate nomination for each person.

#### Nomination 1

Authorised Signatory     Verifying Officer  
 Add                       Delete

Full Name

Other names known by (if any)

Position

Residential Address

Email

Mobile

Date of Birth

Signature

#### Nomination 2

Authorised Signatory     Verifying Officer  
 Add                       Delete

Full Name

Other names known by (if any)

Position

Residential Address

Email

Mobile

Date of Birth

Signature

**Note:** To nominate additional Authorised Signatory (ies)/Verifying Officer(s) please use the Annexure to Authorised Signatory/Verifying Officer Nomination



Organisation IDV

Authorised Signatory/Verifying Officer's Full Name	IDV Number	CIS Key
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Westpac Representative Name

Salary no.

BSB

Signature

Date