

Corporate and Purchasing Card – Cardholder Application

Before completing this form please read the section 'Acknowledgements and Consents' on page 2

Section 1 – Organisation Details

Organisation name

Facility Number

Name and Number of Reporting Level

Product (please select one)

Corporate Card Purchasing Card

Scheme (please select one)

Visa MasterCard®

Section 2 – Cardholder Details

Please complete all sections

Title (e.g. Mr, Mrs)

Given name(s) in full

Surname

Are you known by any other name?

No

Yes ► Please provide details

Note: it is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to knowingly provide false and misleading information

Date of Birth

 / /

Employee Number (if applicable)

Occupation of cardholder

Residential address (no PO Boxes)

Mobile Number

Work phone number

 ()

Email Address

Section 3 – Card Delivery

The Organisation nominates for cards to be sent either to a Branch or Business address. If you are unsure of the facility card delivery options please contact 1300 650 107.

If the Organisation has nominated Branch for card delivery please provide:

BSB or Branch Address

Section 4 – Card Limit and (to be completed by Organisation)

Card Credit Limit (Multiples of \$100)

Section 5 – Transaction Limit and Merchant Restrictions (to be completed by the Organisation)

Please nominate the merchant category(ies) and a transaction limit, if applicable, that will apply to the Card Account.

No merchant restrictions to apply to this card

<input type="checkbox"/> Airline Amount <input type="text"/>	<input type="checkbox"/> Communications Amount <input type="text"/>	<input type="checkbox"/> Medical Amount <input type="text"/>	<input type="checkbox"/> Cash at ATM Amount <input type="text"/>
<input type="checkbox"/> Auto Expense Amount <input type="text"/>	<input type="checkbox"/> Food & Beverage Amount <input type="text"/>	<input type="checkbox"/> Personal Services Amount <input type="text"/>	<input type="checkbox"/> Cash at Branch Amount <input type="text"/>
<input type="checkbox"/> Auto Rental Amount <input type="text"/>	<input type="checkbox"/> Financial Services Amount <input type="text"/>	<input type="checkbox"/> Professional Services Amount <input type="text"/>	<input type="checkbox"/> Transport Amount <input type="text"/>
<input type="checkbox"/> Business Expenses Amount <input type="text"/>	<input type="checkbox"/> Lodging Amount <input type="text"/>	<input type="checkbox"/> Retail Amount <input type="text"/>	<input type="checkbox"/> Education Services Amount <input type="text"/>

Section 6 – Cardholder Acknowledgements and Consents

I, the person named in this request as Cardholder consent to the issue of a Corporate or Purchasing Card selected above ("the card") in my name for my use as agent of the principal named on this form. I acknowledge that use of the Card issued will be governed by Corporate or Purchasing Cards Conditions of Use which will accompany the Card and by which I agree to be bound. I specifically acknowledge that I shall incur nor personal liability in use of the card except where I use the Card after receipt of notice of its cancellation in which event my liability will be joint and several with that of the Principal. I further acknowledge that the Card will only be used by me for business purposes, and not for private or personal purposes under any circumstance.

Privacy Statement

We collect personal information from you to process your application, provide you with your product or service, and manage your product or service. We may also use your information to comply with legislative or regulatory requirements in any jurisdiction, prevent fraud, crime or other activity that may cause harm in relation to our products or services and help us run our business. We may also use your information to tell you about products or services we think may interest you.

If you do not provide all the information we request, we may need to reject your application or we may no longer be able to provide a product or service to you.

We may disclose your personal information to other members of the Westpac Group, anyone we engage to do something on our behalf, rewards program administrators and other organisations that assist us with our business.

We may disclose your personal information to an entity which is located outside Australia. Details of the countries where the overseas recipients are likely to be located are in our privacy policy.

As a provider of financial services, we have obligations to disclose some personal information to government agencies and regulators in Australia, and in some cases offshore. We are not able to ensure that foreign government agencies or regulators will comply with Australian privacy laws, although they may have their own privacy laws. By using our products or services, you consent to these disclosures.

We are required or authorised to collect personal information from you by certain laws. Details of these laws are in our privacy policy.

Our privacy policy is available at westpac.com.au or by calling 132 032. It covers:

- how you can access the personal information we hold about you and ask for it to be corrected;
- how you may complain about a breach of the Australian Privacy Principles or a registered privacy code and how we will deal with your complaint;
- how we collect, hold, use and disclose your personal information in more detail.

We will update our privacy policy from time to time.

We will use your personal information to contact you or send you information about other products and services offered by the Westpac Group or its preferred suppliers. Please call us on 132 032 or visit any of our branches if you do not wish to receive marketing communications from us.

'We', 'our', 'us' means Westpac Banking Corporation ABN 33 007 457 141. 'Westpac Group' means Westpac Banking Corporation and its related bodies corporate.

Cardholder Signature

Date

Section 7 – Authorisation

This form must be signed in accordance with the current authorisation held by Westpac. Westpac will not act on these instructions unless the signatories are authorised to do so under the current authorisation held by the Bank. This form is to be signed by:

- **Company:** Two Directors or a Director and Company Secretary
- **Trust:** Trustee – if a Company (see above) or by an Individual Trustee
- **Association:** in accordance with Minutes of Meetings or other authority
- **Partnership:** Two Partners or other authority

OR

Authorised Signatory(ies)

To be signed in accordance with the instructions provided by the Organisation at establishment of the facility

Signatory 1

Name

Position/Title

Signature

Date

Signatory 2

Name

Position/Title

Signature

Date

Verifying Officer (If applicable)

Name

Position/Title

Signature

Date

If this form is signed by Authorised Signatory(ies) please fax to (02 9374 7916) or email nbcommercialcards@westpac.com.au
Alternatively please return the signed form to your Westpac representative

Westpac Use Only

Load to New Business

The Westpac representative is to verify signatures and check that the form has been signed in terms of the authority held if signed by Director/Secretary.

Cardholder CIS Key

Cardholder WBC IDV

Westpac Representative Name

Signature

Phone

Salary Number