

# **Commercial Card – Update Cardholder's Contact Details**

Complete the form after reading the 'Privacy Statement' section below and return to commercialcards@westpac.com.au

Section 1 - Organisational details	
Organisation name	
Facility number (mandatory)	

# Section 2 – Cardholder details

For each cardholder listed please provide at least an email or a mobile number where they can be reached. If you have more than 30 cardholders please attach a list with the required information to this form.

Card Number	Cardholder Name (optional)	Cardholder's Mobile Number	Cardholder's Email
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#### Section 3 – Privacy Statement (for individuals whose personal information may be collected – in this clause referred to as "you")

All personal information and credit-related information (if applicable) we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at <u>westpac.com.au/privacy/privacy-statement</u> or by calling us through your relationship manager or Westpac representative. Our Privacy Statement also provides information about how you can access and correct your personal information, and make a complaint. You do not have to provide us with any personal information or credit information (if applicable) but, if you don't, we may not be able to process an application or a request for a product or service.

Where individuals engage with us in relation to products and services for our business, corporate or institutional customers (for example, as representative, administrator, director, corporate officer, signatory, beneficiary or shareholder of one of our customers) our Privacy Statement will be relevant to those individuals where we collect and handle their personal information. For example, where we collect their personal information to verify their identity or collect their signature as a signatory on a corporate account.

## Section 4 – 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:

<ul> <li>Company: Two Directors or a Director and Company Secretary</li> <li>Trust: Trustee - if a company (see above) or by an Individual Trustee</li> <li>Association: In accordance with Minutes of Meetings or other authority</li> <li>Partnership: Two Partners or other authority.</li> </ul>			OR	Authorised Signatory( To be signed in accorda instructions provided by at establishment of the	nce with the y the Organisation
Signatory 1		Signatory 2			
Name		Name			
Position/Title		Position/Titl	е		
Signature	Date / /	Signature			Date / /

If this form is signed by Authorised Signatory(ies) please fax to (02) 9374 7003 or email commercialcards@westpac.com.au Alternatively please return the signed form to your Westpac representative.

#### Westpac use only

### Load to CCU

Westpac representative is to verify signatures and that the form has been signed in terms of authority held if signed by Director/Secretary. CIS Key name change must be completed prior to requesting the change of the Organisation name on the facility.

Westpac Representative Name			Organisation CIS Key (Mandatory)		
Contact			Signature		
Salary number	Date		~		
	/	/			