

American Express® Corporate Card Employee Application Philippines

Limited Liability

1. Please Tell Us About Yourself

FULL NAME MR/MRS/MS/DR/OTHERS (AS IN I.C. AND UNDERLINE SURNAME)

NAME TO APPEAR ON THE CARD WITH SURNAME IN FULL WITHIN 20 SPACES

DATE OF BIRTH (DAY/MONTH/YEAR)

MALE FEMALE

I.C. / PASSPORT NO.

NATIONALITY

NAME OF COMPANY TO APPEAR ON CARD

PRESENT RESIDENTIAL ADDRESS

POST CODE HOME PHONE

NO OF MONTHS / YEARS

MOBILE PHONE

OWN PROPERTY RELATIVE RENTED

PERMANENT HOME ADDRESS

FOR NON-PHILIPPINO AND NON-PERMANENT RESIDENTS, YOU ARE REQUIRED TO PROVIDE YOUR PERMANENT OVERSEAS ADDRESS OR YOUR APPLICATION WILL BE REJECTED.

NO OF MONTHS / YEARS

By ticking this box I request that my application is given priority handling. I understand that upon approval of the Corporate Card, a fee of US\$20 to cover the additional special handling costs will be billed to my Corporate Card Account.

Please ensure all the application details are completed to speed up the application process and send to:

**New Accounts, American Express International, Inc.,
4th Floor ACE Buidling, Rada Corner Dela Rosa Streets, Legaspi Village,
Makati City, Philippines. Tel: (632) 814 4778 Fax: (632) 892 9136**

2. Your Job and Income

NAME OF COMPANY

EMPLOYEE NO CORPORATE IDENTITY NO

POSITION NO OF MONTHS / YEARS

If you wish to receive product offers and service updates from us via email provide your mail address below.

EMAIL ADDRESS

BUSINESS ADDRESS

POST CODE

BUSINESS PHONE

EXT

GROSS ANNUAL SALARY

US\$

(PLEASE ATTACH COPY OF LATEST PAYSリップ)

3. Where Do You Bank?

PERSONAL BANK NAME IN FULL

BANK BRANCH

ACCOUNT NO

ACCOUNT TYPE

SAVINGS

CURRENT

LIST OTHER CREDIT/CHARGE CARD(S) IF ANY (PLEASE TICK THE RELEVANT BOX)

DINERS

VISA

M.C.

NONE

ACCOUNT NO

ACCOUNT NO

4. Your Billing Address

HOME OFFICE

5. American Express Cardmember Experience

ARE YOU AN AMERICAN EXPRESS CARDMEMBER? (PLEASE TICK THE RELEVANT BOX)

PRESENT

FORMER

NONE

ACCOUNT NO

6. Agreement and Signatures

DECLARATION BY APPLICANT

I, THE CORPORATE CARD APPLICANT, HEREBY APPLY TO YOU, AMERICAN EXPRESS INTERNATIONAL, INC. FOR AN AMERICAN EXPRESS CORPORATE CARD. IF ISSUED TO ME, I AGREE TO USE THAT CORPORATE CARD FOR BUSINESS PURPOSES ONLY AND COMPLY WITH THE CONDITIONS THAT ACCOMPANY THE CORPORATE CARD. I CERTIFY THAT THE INFORMATION GIVEN ABOVE IN SUPPORT OF MY APPLICATION IS TRUE AND CORRECT. I ACKNOWLEDGE THAT YOU WILL VERIFY THE ABOVE INFORMATION WITH MY EMPLOYER AND OTHER SOURCES. I UNDERSTAND AND AGREE THAT I WILL BE LIABLE FOR ALL CHARGES MADE WITH THE CORPORATE CARD. THE COMPANY NAMED IN THIS APPLICATION IS ALSO LIABLE TO AMERICAN EXPRESS INTERNATIONAL, INC. FOR CHARGES THAT IT AUTHORIZES ME TO MAKE AND WHICH WERE USED FOR THE COMPANY'S BUSINESS PURPOSES UNLESS AND UNTIL THE COMPANY REIMBURSES ME FOR SUCH CHARGES. I WE AUTHORISE YOU TO VERIFY THE INFORMATION IN THIS APPLICATION AND TO RECEIVE AND EXCHANGE INFORMATION ABOUT ME, INCLUDING REQUESTING REPORTS FROM CONSUMER CREDIT REPORTING OR REFERENCE SCHEMES.

I AUTHORISE YOU AND YOUR AFFILIATES TO CONTACT THESE SOURCES FOR INFORMATION AT ANY TIME, TO USE INFORMATION ABOUT ME, INCLUDING INFORMATION FROM THIS APPLICATION AND FROM CONSUMER CREDIT REPORTS, FOR MARKETING AND ADMINISTRATIVE PURPOSES AND TO SHARE SUCH INFORMATION WITH EACH OTHER.

INFORMATION SUPPLIED IN THIS APPLICATION AND INFORMATION ABOUT MY ACCOUNT MAY BE DISCLOSED CONFIDENTIALLY TO (I) OTHER COMPANIES IN THE AMERICAN EXPRESS GROUP OR ITS LICENSEES WORLDWIDE INCLUDING ANY PARTY WHOSE NAME OR LOGO APPEARS ON THE CARD ISSUED TO ME; (II) THIRD PARTIES EMPLOYED BY AMERICAN EXPRESS TO PROVIDE IT WITH ADMINISTRATIVE SERVICES IN CONNECTION WITH THE OPERATION OF CUSTOMER ACCOUNTS AND MARKETING OF ACCOUNT SERVICES AND (III) YOUR SUPPLIERS AND TO ORGANISATIONS WHO ACCEPT THE CARD IN PAYMENT OF GOODS AND/OR SERVICES PURCHASED BY ME, IN ORDER TO ADMINISTER AND SERVICE MY ACCOUNT, PROCESS AND COLLECT CHARGES ON IT AND MANAGE THE BENEFITS OR INSURANCE PROGRAMS IN WHICH I AM ENROLLED; (IV) BANK OR FINANCIAL INSTITUTION, GOVERNMENT AGENT, STATUTORY BOARD OR REGULATORY AUTHORITY IN SINGAPORE OR ELSEWHERE AND (V) ANY OTHER PERSON TO WHOM WE CONSIDER IT IN OUR INTEREST TO MAKE SUCH DISCLOSURE.

FROM TIME TO TIME YOU MAY MONITOR AND/OR RECORD TELEPHONE CALLS BETWEEN YOU AND I TO ASSURE THE QUALITY OF YOUR CUSTOMER SERVICE.

YOU MAY USE AND/OR EXCHANGE INFORMATION I HAVE PROVIDED TO YOU ON MY APPLICATION AND IN SURVEYS, INFORMATION DERIVED FROM HOW I USE THE CARD AND INFORMATION FROM EXTERNAL SOURCES, INCLUDING CONSUMER REPORTS, WITH YOUR AFFILIATES FOR MARKETING ACTIVITIES BY YOU AND YOUR AFFILIATES. YOU MAY ALSO USE THIS INFORMATION TO DEVELOP MAILING LISTS WHICH ARE USED BY COMPANIES WITH WHOM YOU WORK TO DEVELOP OFFERS I MAY RECEIVE THROUGH MY MAIL. IF AT ANY TIME I WISH TO HAVE MY NAME AND ADDRESS REMOVED FROM MARKETING LISTS DEVELOPED FOR SUCH PURPOSES I SHALL CALL YOU AT (632) 814 4778.

IF I BELIEVE THAT ANY INFORMATION YOU HOLD ABOUT ME OR INFORMATION YOU PROVIDED TO A CONSUMER REPORTING OR REFERENCE SCHEME IS INCORRECT, I SHALL WRITE TO YOU AT 4TH FLOOR ACE BUILDING, RADA CORNER DELA ROSA STREETS, LEGASPI VILLAGE, MAKATI CITY, PHILIPPINES. ANY INFORMATION WHICH YOU FIND TO BE INACCURATE WILL BE CORRECTED PROMPTLY.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND AGREE TO THE DECLARATION STATED ABOVE.

SIGNATURE OF APPLICANT

DATE (DD/MM/YY)

DECLARATION BY COMPANY SIGNATORY

ON BEHALF OF THE COMPANY NAMED IN THIS APPLICATION (THE "COMPANY"), I HEREBY REQUEST ISSUANCE OF A CORPORATE CARD TO THE INDIVIDUAL NAMED ABOVE AND CERTIFY THAT THE NAMED INDIVIDUAL IS AN EMPLOYEE OF THE COMPANY. I CONFIRM THAT THE INFORMATION GIVEN IN THIS APPLICATION FORM IS TO THE BEST OF THE COMPANY'S KNOWLEDGE TRUE AND CORRECT, AND THAT THE COMPANY HEREBY AGREES TO BE BOUND BY THE AMERICAN EXPRESS CORPORATE CARD CONDITION, WITH RESPECT TO SUCH CORPORATE CCARD.

SIGNATURE OF AUTHORISED SIGNATORY

DATE (DD/MM/YY)

NAME OF AUTHORISED SIGNATORY (PLEASE PRINT)

POSITION

COMPANY STAMP