## American Express<sup>®</sup> **Corporate Card Employee Application** Limited Liability New Zealand

Mail To: American Express, PO Box 4005, Shortland Street, Auckland 1140 or Fax to 0800 005 557 or 612 9271 1151

#### Please allow up to 10 business days for processing.

By ticking this box I request my application is given priority handling and will be processed in 5 business days. I understand upon approval of the Corporate Card, a fee of NZ\$50 will be billed to my Corporate Card Account to cover additional handling costs.

#### ALL FIELDS ARE MANDATORY AND MUST BE COMPLETED IN BLACK PEN AND BLOCK LETTERS.

1. Corporation Details
Corporation Name: (company)
Telephone: ( ) Fax: ( )
Programme Administrator's Name:
Corporate ID:
Cost Centre Name:
Cost Centre Number:
Employee Number: (if required)
Overall spend limit on Card: (if applicable)
2. Employee Details
Title: Mr Mrs Ms Miss
Surname:
Given Names:
Email Address – If you wish to receive important information about your account, product offers and service updates from us via email please provide your email address.
Business Street Address:
Postcode:
Business Telephone: ( )
Mailing Address (P.O. Box):
Postcode:

2. Employee Details (cont.)				
Position in Company:				
Years with Company:				
3. Personal Details				
Home Street Address:				
Postcode:				
Home Telephone: ( )				
Driver's Licence No:				
Own Buying Rent Years There: (YY/MM) /				
Date of Birth: (DD/MM/YY) / / 19				
Your name as you would like it embossed on the Corporate Card (Max 20 Characters)				
Have you ever held an American Express Card?				
Present Member Provide Present Member No				
Account No:				
4. Office Use only				
prod 602 proc 3 team 6				
CAN/ DEC FEE 2 DELIV				
REV 7 BILL IND SEX				
CB PRES/ XREF REPORT Y PREV RSN				

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ID VERO

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SIGN

# 5. Proof of Identity, Agreement and Signatures

#### Proof of Identity

American Express is required under the Financial Transaction Reporting Act 1996, to verify the identity of new Corporate Card applicants.

To verify your identity you must provide one form of photo identification to American Express with this application.

#### Acceptable forms of photo identification (must be current)

The photo identification should be a photocopy of ONE of the forms of identification below. Please ensure the photocopy is enhanced/enlarged so that the photo is clearly legible.

Passport	• Firearms Licence
<ul> <li>New Zealand Driver's Licence</li> </ul>	<ul> <li>Hanz 18+ Card</li> </ul>

#### **Declaration by Applicant**

I, the Corporate Card applicant, hereby apply to you (American Express International (NZ), Inc.) for an American Express Corporate Card, If issued to me, I agree to use that Corporate Card for business purposes and to comply with the conditions that accompany the Corporate Card. I certify that the information given in support of my application is true and correct. I acknowledge that you will verify the information with my employer and other sources, and verify with the LTSA driver's licence and car registration information provided by me.

I also authorise you to confirm and exchange credit information concerning my financial affairs as described more fully below. I understand and agree that I will be liable for all charges I make with the Corporate Card. The Company named in this application is also liable to American Express International (NZ), Inc. for charges which it authorises me to make and which were used for the Company's business purposes unless and until the Company re-imburses me for such charges.

By signing below I acknowledge that I have read and agree to the declaration stated above, and I have read and clearly understood the terms and conditions below and on the following page of this form.

Date

#### **Declaration by Company Signatory**

On behalf of 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 on behalf of the Company that the information given in this application form is to the best of our knowledge true and correct, and that the Company agrees to be bound by the American Express Corporate Card Conditions, with respect to such Corporate Card. I warrant that I am authorised to make this declaration on behalf of the Company.

Signature of Authorised Signatory: Da	ate /	,

Limited Liability 03/08

# Authority to American Express International (NZ), Inc. under the Privacy Act:

To assess your application, and if it is approved, to establish and manage your Card Account, American Express International (NZ), Inc. needs to:

- collect personal information about you in this application form and from other sources, and
- obtain your agreement in relation to handling this personal information.

If you do not provide the information requested or give your agreement on this form, American Express International (NZ), Inc. may decline your application.

In accordance with the Privacy Act, you can access personal information about you held by American Express International (NZ), Inc., and advise if you think it is inaccurate, incomplete or out-of-date.

To arrange access to personal information about you, request a copy of the American Express Privacy Policy Statement or enquire generally about privacy matters, write to: The Privacy Officer, American Express International (NZ), Inc.,

PO Box 4005, Shortland Street, Auckland 1140.

In this section 'personal information' means information about me, including about my financial circumstances, my credit worthiness, credit history, credit standing, credit capacity, my use of the Card and conduct of my Account with you.

I agree that, subject to the Privacy Act, you and your agents may do the following (and if my application is successful, this agreement continues until such time as any credit provided to me is repaid):

- Exchange personal information about me with the Company (including any related entity of the Company), and its and their processors, in connection with the Corporate Card.
- Obtain credit reports about me from reporting agencies to assess my application or to collect overdue payments from me, or from a business that provides commercial credit worthiness information.
- Disclose personal information to credit reporting agencies before, during or after providing credit to me. This includes, but is not limited to:
- the fact that I have applied for a Card, and that you are a credit provider to me;
- advice about Card payments at least 60 days overdue and which are in collection (and advice that payments are no longer overdue);
- advice that cheque(s) drawn by me, or direct debit requests to my bank account which I have authorised you to make, have been dishonoured;
- your opinion that I do not intend to meet my credit obligations (or that I have committed some other serious credit infringement); and

- that credit provided to me has been paid or otherwise discharged.

- Exchange personal information with credit providers named in this application or in a credit report issued by a credit reporting agency.
- This is for purposes including but not limited to:
- assessing my credit worthiness, this application and any subsequent application by me for credit;
- notifying other credit providers of a default by me;
- exchanging information about my Card Account where I am in default with other credit providers;
- your approval process as to any transactions I wish to make with the Card; and
- your administration of my Account.
- Exchange personal information with any person whose name I give you from time to time. This includes, for example, for the purpose of confirming my employment and income details with any employer, landlord/mortgagee, accountant, financial adviser or tax agent named in this application.
- If I am in default under my Card Account, notify and exchange personal information with your collection agent.
- Provide personal information to any organisation whose name, logo or trademark appears on my application or on the Card issued to me for marketing, planning, product development and research purposes.
- Use personal information for marketing purposes. This includes putting my name and contact details on marketing lists for the purposes of customer research and offering me goods or services of an American Express company or of any third party, by mail, email or telephone or having your related companies do so directly. After approval of this application, I understand that I can call 0800 263 936 to remove my name from your marketing lists.
- Transfer personal information confidentially to your related companies and other organisations which issue or service American Express Cards or provide services to you, subject to appropriate conditions of confidentiality. This includes transferring personal information to the United States or other countries for data processing and servicing.
- Monitor and record my telephone conversations with you from time to time for training, quality control or verification purposes.
- I also agree that where I have provided you with information about another individual in this application form, I will make sure that the individual is aware of:
- my supplying their information to you and the purposes why you have collected the information; and
- their ability to access that information in accordance with the Privacy Act (and to advise you if they think the information is inaccurate, incomplete or out-of-date); and the contact details of your Privacy Officer.

### **Customer Service**

The Corporate Card Department is open during business hours for any inquiries about your Card Account, for advice on Card services, or to request contact details regarding any American Express Travel Office.

Please call on 0800 722 333 between 8.30am - 5.30pm Monday to Friday or visit our website at: americanexpress.co.nz/cs

americanexpress.co.nz/cs

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