

Application for **EXISTING** Business and Corporate Card Members

For International and Domestic payments

CLEAR FORM

By ticking this box you acknowledge that you have received and agree with the **Telegraphic Transfers and Forward Exchange Contracts Product Disclosure Statement**

Please select the products you would like to setup:

- Outgoing Telegraphic Transfers Incoming Telegraphic Transfers
 Forward Exchange Contracts Cross Currency Telegraphic Transfers

SECTION 1 - BUSINESS INFORMATION

Full Legal Entity Name (As per ASIC/ABR) ('The Business')	ABN (If no ABN, please provide ACN or ARBN)
American Express Card Number 1 (Corporate or Business Cards Only) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiry Date (MM/YYYY) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name on Card	Authorised Signatory Name and Signature

Will this card account be used to accrue rewards points earned from FXIP transactions? Yes No

SOURCE OF WEALTH FOR YOUR BUSINESS

NB: The most recent financial statements and documentation to support wealth generation may be requested to complete your application. By completing and signing this application you acknowledge and agree that we may request trade references, financial statements and/or other supporting documentation from your Business from time to time.

Company Profits Other If 'Other' selected, please specify:

Please tell us about the types of goods and services for which you'll need to make international or domestic payments:

Countries to which you'll make/receive payments:

Domestic (Australia Only) International. Please list countries:

SECTION 2 - SETTLEMENT METHOD(S)**SOURCE OF FUNDS**

Please provide the bank accounts from where funds will originate from or be transferred to. By signing this application you acknowledge and agree that we may request support documentation from your company about this account from time to time.

NB: Please provide a voided cheque or copy of a current bank statement to support your application.

Financial Institution Name	Suburb of Branch	
Name on Account	BSB	Account Number

Direct Debit

Would you like to set up a direct debit payment for your FXIP transactions? (N/A if setting up accessline only)

- Yes, I would like to request and authorise American Express (User ID No.031275) subject to the Direct Debit Service Agreement (outlined at the end of this application form) to debit amounts in connection with our relationship with American Express, from our nominated account at the financial institution listed above.

AccessLine™

(Select this option if you would like to use your American Express Corporate or Business Card(s) to settle transactions. AccessLine transactions include a Trade Service Fee of up to 2.15%, please speak to your representative for more details).

- Yes, I would like to register for AccessLine using the American Express Card provided in "Section 1 - Business Information"

If you would like to use an alternative card please provide the American Express Card you would like to use below:

American Express Card Number 2 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiry Date (MM/YY) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
Name on Card	Authorised Signatory Name and Signature
Card "Nickname" to appear on transaction screen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Please provide a Card "nickname" to appear on transaction screen. If no preferred "nickname" provided, the last 4 digits of the Card number will appear. Nicknames can be up to 10 alphanumeric characters (please don't use spaces, symbols or special characters)
Will this card account be used to accrue rewards points earned from FXIP transactions? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 3 - HOW WOULD YOU LIKE TO MANAGE YOUR FXIP ACCOUNT?

FX International Payments offers multiple levels of authorisations for online clients, please select the appropriate level of authorisation for your Business (only select one option):

- Single Verification:** User inputs the payment details and approves the same payment to complete the transaction.
- Dual Verification:** User inputs the payment details but is not authorised to approve the same payment for release, another user verifies the information and approves the payment to complete the transaction.

PRIMARY USER DETAILS

Full Name	Date of Birth (DD/MM/YYYY) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Email	Position/Title	
City of Residence	Country of Residence	Signature

Please indicate all applicable authorisation levels for this user (Please select options for single or dual only):

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Single Verification:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Input and approve payments <input type="checkbox"/> View transaction history/generate reports <input type="checkbox"/> Administer account changes and change user authorisation (Account Administrator) | <p>Dual Verification:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Input payment details <input type="checkbox"/> Approve payments made by a different user <input type="checkbox"/> View transaction history/generate reports <input type="checkbox"/> Administer account changes and change user authorisation (Account Administrator) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

^By providing us with your email address, you consent to us sending you email messages with details about changes to your account Terms and Conditions, other important information about your account, commercial electronic messages and offers that may be suited to your needs. Please visit our website page <http://americanexpress.com.au/privacy> and select "How to Decline Email" to review or change your email choices.

Opt-Out: I do not wish to receive email messages about offers that may be suited to my needs.

SECONDARY USER DETAILS

Full Name	Date of Birth (DD/MM/YYYY) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Email	Position/Title	
City of Residence	Country of Residence	Signature

Please indicate all applicable authorisation levels for this user (Please select options for single or dual only):

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Single Verification:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Input and approve payments <input type="checkbox"/> View transaction history/generate reports <input type="checkbox"/> Administer account changes and change user authorisation (Account Administrator) | <p>Dual Verification:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Input payment details <input type="checkbox"/> Approve payments made by a different user <input type="checkbox"/> View transaction history/generate reports <input type="checkbox"/> Administer account changes and change user authorisation (Account Administrator) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

^By providing us with your email address, you consent to us sending you email messages with details about changes to your account Terms and Conditions, other important information about your account, commercial electronic messages and offers that may be suited to your needs. Please visit our website page <http://americanexpress.com.au/privacy> and select "How to Decline Email" to review or change your email choices.

Opt-Out: I do not wish to receive email messages about offers that may be suited to my needs.



SECTION 4 - APPLICATION DECLARATION

1. By signing below, I request American Express to approve this application for FXIP services on behalf of the business entity named in Section 1 of this application form.
2. I agree that I have read and understand the terms and conditions contained in the Product Disclosure Statements applicable to the products that my Business has elected to utilise.
3. I understand and agree that American Express is entitled to require receipt of cleared funds before finalising the transaction.
4. I authorise American Express to obtain credit reports at its discretion from credit reporting agencies on our Business, or where appropriate, conduct commercial reports on individuals if my Business is stated as a Sole Proprietorship.
5. If I have elected to establish a "Forward Exchange Contract" facility, I authorise American Express to apply for a CICI on behalf of my company as part of the reporting requirements under the Dodd-Frank Wall Street Reform and Consumer Protection Act.
6. I understand it is an offence under the Anti-Money laundering and Counter-Terrorism Financing Act 2006 to knowingly provide false, incomplete or misleading information.
7. As the individual signing below I confirm that I/we are authorised to sign this application and that all information provided is correct.
8. If the Business has elected to settle FXIP transactions via AccessLine, I/we acknowledge and agree and that the users specified in section 3 of this application form are authorised by the Business to pay for FXIP transactions using the Corporate Card details provided in this application form.
9. If the Business has elected to settle FXIP transactions via Direct Debit, I/we acknowledge:
 - that I/we have read and understood the Direct Debit Request Service Agreement and agree to be bound by the terms of that agreement in addition to the Terms and Conditions for Foreign Exchange Transactions contained in our Product Disclosure Statements; and
 - that this Direct Debit Request requests and authorises American Express to debit amounts from my/our nominated account from time to time.
10. Read our Privacy Statement to understand how we may use your personal information.

Information about other individuals (e.g. Primary Users or other Card Members)

You agree that where you have provided American Express with personal information about another individual in this application, you will make sure that the individual has seen, understood and agreed to:

- American Express receiving their personal information for the purposes for which we have collected the information;
- their ability to access information in accordance with the Privacy Act (and advise American Express if they think the information is inaccurate, incomplete or out-of-date); and
- the contact details of the American Express Privacy Officer.

AUTHORISED OFFICER

By signing below, the authorised officer binds the above business entity to the terms of the declaration in his/her capacity as:

Authorised Officer: Full Name		Date of Birth (DD/MM/YYYY) □□ / □□ / □□□□
Position/Title	Signature	Date Signed (DD/MM/YYYY) □□ / □□ / □□□□

DIRECT DEBIT SERVICE AGREEMENT (please only read and acknowledge if direct debit selected as settlement method)

1. This Agreement authorises American Express (User ID No. 031275) to withdraw money from your nominated account as set out in section 2 above.
2. Before you complete the Direct Debit Request in section 2 above, you must check that your nominated account can accept direct debits (some passbook savings accounts and credit cards and accounts outside Australia cannot have direct debits). Contact your financial institution to find out if we can withdraw money from your account by direct debit.
3. When you complete the Direct Debit Request in section 2 above, you must:
 - carefully check that the account details are correct by comparing them with a recent statement, cheque or deposit slip from your financial institution; and
 - make sure your request is signed in accordance with your authority to operate your nominated account. Every nominated account holder must sign the Direct Debit Request in section 2 above. The nominated account must belong to you.
4. If we want to change this Agreement, we will notify you 14 calendar days in advance of any change. If you disagree with any change, please notify us within these 14 days.
5. Please notify American Express in writing if you want to:
 - change or cancel this Agreement; or
 - change your nominated account details (we will require you to sign a new Direct Debit Request); or
 - stop or defer an individual payment.
6. If you want to dispute a debit that has been made from your nominated account, you should contact us immediately and we will respond to you within 7 days. If we determine that your nominated account was incorrectly debited we will provide you with reasons for this finding. Either case, we will notify you of the result.
7. We will use our best endeavours to notify you in writing before debiting your nominated account. If the debit date is on a weekend or public holiday in Sydney, we will process your payment on the next business day.
8. You must make sure that sufficient cleared funds are available in your nominated account on the payment date. If there are insufficient funds and your financial institution dishonours the payment then:
 - any charges and tax on those charges incurred by our financial institution may be debited from your nominated account;
 - any charges and tax on those charges incurred by us may be debited from your account; and
 - the amount of the dishonoured debit will be debited to your account.You must advise us in writing if you close your nominated account.
We also reserve the right to cancel the Direct Debit Request if any debit is returned unpaid by your financial institution.
9. We will keep your financial institution account details confidential. However, we will disclose these details:
 - if you consent; or
 - to the extent required by law, for example, if a court requires disclosure; or
 - for the purpose of this Agreement, for example, to settle a dispute.
10. You indemnify us against all losses, costs, damages and liability that we suffer as a result of you giving us incorrect or false information in your Direct Debit Request.
Your indemnity:
 - extends and covers all changes you make to your Direct Debit Request; and
 - continues after this agreement is ended.

In this Agreement, "American Express", "we", "us" and "our" means American Express International, Inc. ABN 15 000 618 208.

Client Service Centre

Phone: 1300 554 884 **Email:** businessfx@aexp.com **Website:** www.americanexpress.com/au/foreign-exchange/international-payments/

Payments are arranged through American Express International, Inc. (ABN 15 000 618 208, AFSL No. 237996).
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