

BSP VISA BUSINESS CREDIT CARD | Supplementary Cardholder Request

- Before you complete this form, please read the Acknowledgements and Consents Section
- · All applicants must be at least 18 years of age and an employee of a business registered in Cook Islands
- Fees and charges apply. Terms and Conditions available on request. These may be varied, or new terms and conditions introduced in the future
- · Credit card application/credit limit increase applications (as applicable) are subject to the Bank's normal lending criteria.

Company/Business name RSP Visa Business Credit Card No.
BSP Visa Business Credit Card No.
bsi visa basiness erean eara no.
Cardholder Details
Title Surname
Given name(s) (in full)
Date of birth Relationship to the company/business (i.e. Director etc.)
Residential address
Home phone no. Work phone no. Marital status Mother's maiden name
Email address
Card Delivery Instructions
For security reasons the BSP Visa Business Credit Card must be collected from a BSP branch. Please indicate the name of a convenient be to which the Card may be forwarded.
Branch name

Acknowledgements and Consents

I, the person named in this request as cardholder consent to the issue of a BSP Visa Business Credit Card as requested in this form ('the Card"), in my name for my use as agent of the Principal named herein. I acknowledge that use of the Card issued will be governed by Conditions of Use which will accompany the Card and by which I agree to be bound. I specifically acknowledge that I shall incur no 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 circumstances.

PRIVACY CONSENTS

I agree that the Bank and any other member of the Bank South Pacific may exchange with each other any information about me including:

- · any information provided by me in this document;
- · any other personal information I provide to any of them or which they otherwise lawfully obtain about me; and
- transaction details or transaction history arising out of my arrangements with the Bank.

If the Parties engage anyone (a "Service Provider") to do something on their behalf (for example a mailing house or a data processor) then I agree the Parties and the Service Provider may exchange with each other any information referred to above.

The Bank might give any information referred to above to entities other than the Parties and the Service Provider where it is required or allowed by law or where I have otherwise consented.

I agree that any information referred to above can be used by the Parties and any Service Provider to issue the Card to me and for account administration, planning, product development and research purposes.

I understand that if I fail to provide any information requested in this form, or do not agree to any of the possible exchanges or uses detailed above, this request may not be accepted by the Bank.

Members of the Bank South Pacific would like to be able to contact you, or send you information, regarding other products and services. The Conditions of Use will explain what action to take if you do not wish to receive this information.

Signature	Date
X	
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Principal's Use (Credit Card Requests)	
The Principal hereby requests issue of a Card to the above named Business Credit Card facility.	d cardholder in terms of and pursuant to the Principal's BSP Visa
• Do you want the above mentioned to have access to cash adv	vances?
Yes No	
If 'YES' or not completed, access to cash advances will be availab	ole on the card up to and including all of the available limit.
• Do you want a PIN to be issued?	
Yes No	
Visa Business Credit Card Facility Limit	
Facility limit	Available limit*
\$	\$
*If you are unsure of your available limit, please contact your ne	arest BSP branch
The Principal hereby requests issue of a Card to the above named Credit Card Facility.	d cardholder in terms of and pursuant to the Principal's Visa Business
Card limit (multiples of \$100 only, maximum limit of \$1,000)	\$
The daily cash advice limits to apply for the cardholder are:	
At Automatic Teller Machines (ATM) (multiples of \$100 only, maximum limit of \$1,000)	At bank/branch counter
\$	\$
Note : if amounts are left blank the cash advance limits set for the available enter amount(s) as 000.	ne company/business will apply. If cash advances are not to be
Do you want a PIN to be issued?	Yes No
Financial Transaction Reporting Act	
Are you known by other name(s)?	Yes No
Please give other name(s)	
Note : it is an offence under the Financial Transaction Reporting <i>A</i>	Act to make a false or misleading statement.
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Signed for and on behalf of (company name)/by the Sole Trader/as Trustee for (unincorporated association name)/by the Partnership (partnership name)		
(please delete those that are not applicable)		
By authorised signatory/ies (print name)		
Signature	Date / /	
X	, ,	
By authorised signatory/ies (print name)		
Signature	Date	
X	/ /	
Signed by the Related Individuals (company only)		
Application Form.	Individuals who signed the original Visa Business Credit Card facility	
Print name		
Signature	Date	
X		
Print name		
Fillit Hallie		
Signature	Date	
X	/ /	
Bank Use Only		
Branch/Department to verify Principal's signature(s) and forward re	quest to card centre. Request signed in terms of authority held.	
Nominated cardholder		
Managed a company (a girth a company)	ncp.	
Manager's name (print name)	BSB	
Manager's Signature	Date CIF no.	
	/ /	
(Bank Stamp)		