Business Credit Cards – Add a Cardholder

• NAB Low Rate Business Card
• NAB Business Card • NAB Rewards Business Signature Card
• NAB Qantas Business Signature Card

Please complete Application form in full in black or blue pen using CAPITAL LETTERS and ✗ where appropriate.

Please return the completed form to your nearest NAB Branch or Banker.

Section A Business details

Registered Business/Company name

Facility billing account number

Business address

Suburb State Postcode

Business telephone number ( )

Email address

Section B Business details

Important Information for NAB Rewards Business Signature Card

All points earned using either of these cards are credited to the customers points balance.

Important Information for NAB Qantas Business Signature Card

To earn Qantas Points, the business must be a member of the Qantas Business Rewards Program. All points earned using either of these cards are credited to the business' points balance.

Qantas Business Rewards membership and earning Qantas Points are subject to Qantas Business Rewards Terms and Conditions. For more information, go to, **qantasbusinessrewards.com/terms**

A one-off joining fee usually applies but will be waived for the business taking a new NAB Qantas Business Signature Card who join by visiting **qantas.com/nabqbr** or calling **13 74 78**

Important information for new cardholders

To meets NAB's regulatory obligation all additional cardholders on business credit cards must be identified in accordance with the NAB Ltd Anti-Money Laundering & Counter Terrorism Financing (AML/CTF) Program.

This can be completed by visiting your nearest NAB Branch or calling **13 10 12**.

Cardholder 1

☐ Owner ☐ Employee

Title Surname Given name/s Date of birth (DD/MM/YYYY) / /

Residential address

Suburb State Postcode Mobile

Please specify cardholders credit limit (Min. $1,000)

$

Allow Cash Advance access for this Cardholder? ☐ Yes ☐ No

Cardholder 2

☐ Owner ☐ Employee

Title Surname Given name/s Date of birth (DD/MM/YYYY) / /

Residential address

Suburb State Postcode Mobile

Please specify cardholders credit limit (Min. $1,000)

$

Allow Cash Advance access for this Cardholder? ☐ Yes ☐ No

Cardholder 3

☐ Owner ☐ Employee

Title | Surname | Given name/s | Date of birth (DD/MM/YYYY)

Residential address

Suburb | State | Postcode | Mobile

Please specify cardholders credit limit (Min. $1,000)

$

Allow Cash Advance access for this Cardholder? ☐ Yes ☐ No

Cardholder 4

☐ Owner ☐ Employee

Title | Surname | Given name/s | Date of birth (DD/MM/YYYY)

Residential address

Suburb | State | Postcode | Mobile

Please specify cardholders credit limit (Min. $1,000)

$

Allow Cash Advance access for this Cardholder? ☐ Yes ☐ No

Cardholder consent

Each cardholder to read and to provide consent by signing as provided below

I consent to the issue of a NAB Commercial Card ('card') in my name for use as agent of the Customer detailed in Section A. I acknowledge I will be provided with Conditions of Use for the card which govern my use of the card.

For NAB Rewards Business Signature Cards

I acknowledge I have no entitlement to NAB Rewards Points earned in connection with my card. Any points earned in relation to my card will be credited to the facility owner's points balance.

For NAB Qantas Business Signature Cards

I acknowledge I have no entitlement to Qantas Points earned in connection with my card. Any Qantas Points earned in relation to my card will be credited to the Business' Qantas Business Rewards account.

Cardholder 1 signature | Date (DD/MM/YYYY) | Cardholder 2 signature | Date (DD/MM/YYYY)

Cardholder 3 signature | Date (DD/MM/YYYY) | Cardholder 4 signature | Date (DD/MM/YYYY)

Customer (Company/Business) Consent

The Customer requests the issue of a card (and Personal Identification Number [PIN]) to the cardholder/s above (or nominated in connection with this application) in accordance with the customer's NAB Commercial Cards Facility Conditions. In the event the cardholder/s has nominated other accounts to be attached to the card under the heading 'Nominated account details', the customer hereby authorises those accounts to be accessed by use of the card and Personal Identification Number issued to the cardholder/s.

Print Full Name | Print Full Name

Signature of Sole Proprietor/Director/Partner | Date (DD/MM/YYYY) | Signature of Director/Partner | Date (DD/MM/YYYY)

Persons authorised to sign for the Business/Organisation

Entity	Person authorised to sign
Sole Trader	Sole Proprietor
Partnership	All Partners
Company or Trust with Company Trustee	Any 2 Directors or Director and Company Secretary or Sole Director and Sole Company Secretary
Trust with individual Trustee	Each individual Trustee

NAB use only

Retail Branch Staff - scan and send a copy of form to Banker if applicable.

	Identification and verification completed		Customer number (9 character)
Applicant/Business			
Cardholder 1	☐ Yes	☐ No	
Cardholder 2	☐ Yes	☐ No	
eForm lodged	☐ Yes	☐ No	

	Identification and verification completed		Customer number (9 character)
Applicant/Business			
Cardholder 3	☐ Yes	☐ No	
Cardholder 4	☐ Yes	☐ No	

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