

APPENDIX ONE: LOCAL DEBIT CARD DETAILS

CARD DETAILS – FOR THE BUSINESS CARDHOLDER(S)

Business are eligible to two Local Debit Cards per Current Account, additional cards requested will incur a one-off fee. For each account on which you would like a Card, please complete a separate section below. Please note that Account Numbers will not be printed on Cards and the Card Name must contain alpha characters only.

Account Number																								
Cardholder Name																								
Cardholder Date of Birth																								
Name on Card (One): In the field below, please print your name as you would like it printed on your Local Debit Card using alpha characters only. Print one character per box, not more than 24 characters, this will include any spacing:																								
<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																								

Cardholder Name																								
Cardholder Date of Birth																								
Name on Card (Two): In the field below, please print your name as you would like it printed on your Local Debit Card using alpha characters only. Print one character per box, not more than 24 characters, this will include any spacing:																								
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AUTHORISED SIGNATORY ONE

Full Name		Signature:		Date:	
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AUTHORISED SIGNATORY TWO (Where Required)

Full Name		Signature:		Date:	
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ADDITIONAL CARDS – For additional account users such as other Signatories, Per Pro or Power of Attorney authorities

Account holders should note that an Additional Card Fee (see Local Debit Card and Account Package Fees Brochure for Fees and Charges) will apply for each additional card requested. Where an Account Holder authorises an additional cardholder on their Account, the Bank will issue the additional Cards directly to the third parties identified here, and the named third parties will, in accepting and using the additional card, have accepted the Local Debit Card, and relevant Account, Terms and Conditions.

Account Number																								
Name of Additional Cardholder																								
Cardholder Date of Birth																								
Title/Position (within the Business)																								
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I agree that the person(s) named above as additional cardholders, may hold a Local Debit Card affiliated with my account and the Card(s) may be distributed to the named additional cardholders (Please Tick as agreed).

Full Name (Account Holder)	Signature:	Date:	
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FOR BANK USE ONLY

Compliance & Operations	Signature	Date		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Account Package & Card Application Approved</td> <td>Package:</td> </tr> </table>	Account Package & Card Application Approved	Package:		
Account Package & Card Application Approved	Package:			
IT				
Card Application Received for Card Services				
Data Input				
Data Input Verification				
Card Production				
Card Inspection				
Customer Services				
Received by Customer Service for dispatch to Customer				
Pack Assembled				
Card issued/dispatched to Customer				