

BusinessChoice Facility Maintenance Form

Please add your information onto this form, print and sign. Once complete, please submit this form to your Westpac representative or branch for verification and processing.

All fields are mandatory.

1. Business details					
Facility number Note: This can be found on your BusinessChoice statement. Business name					
2. Maintenance Option					
Please select the type of amendment you want to make to your Card by ticking the appropriate box below.					
Billing Report request Complete sections 3 and 5 .					
Change of BusinessChoice Card Facility name Complete sections 4 and 5 .					
Amend bill date* Enter new bill date / / Bill date must be between 2nd and 28th of the month					
Number of sweep days 5 15 25 Other					
*Note: If you are reducing the existing statement date, the next statement and payment period may be extended by an additional month. Example: If the last statement cycle closes on the 15th of August and the statement date is being changed to the 10th, the next statement cycle will close on the 10th of October.					
3. Billing Account report					
When requesting a statement, you will need to nominate the required statement closing date to ensure the correct statement is printed.					
Note: Depending on your product, this request may incur a fee. Please refer to the terms & conditions of your product for further details.					
or further details.					
Billing account report Report dates requested / / / / /					
Billing account report Report dates requested / / / // 4. Change of BusinessChoice Card Facility Name (all fields in this section are required) Driginal evidence in the form of certificate of change of business or company name must be presented to a Westpac					
Billing account report Report dates requested / / / / / 4. Change of BusinessChoice Card Facility Name (all fields in this section are required) Original evidence in the form of certificate of change of business or company name must be presented to a Westpace representative for the change to take place.					
Billing account report Report dates requested / / / // 4. Change of BusinessChoice Card Facility Name (all fields in this section are required) Driginal evidence in the form of certificate of change of business or company name must be presented to a Westpac					

Business name

5. Business Authorisation - executed by the Business named in Section 1

This form must be signed in accordance with the current authorisation.

Westpac will not act on these instructions unless the signatories who sign this form are authorised to do so under the current authorisation and in the manner stated in the authorisation.

5.1 Authorisation (must be signed by all Facilities. Joint and Several Liability Facilities must additionally sign in 5.2).

By executing the form below, the Business declares the authorised signatories below have been authorised to execute the application on behalf of the Business requesting the changes set out in the form, by resolution passed at a legally constituted meeting of the Business in accordance with its constitution/rules, and requests Westpac to make the changes set out in the form.

ABN	ACN	and/or AF	RBN	
By authorised signatory 1		Date		
X				
Print name		Title		
Dr. authoricad airmatawy 2		Data		
By authorised signatory 2		Date 1 , , ,		
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Print name		Title		
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Privacy Statement and Consent Request

Privacy Statement.

All personal information and credit-related information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at westpac.com.au/privacy/privacy-statement/ or by calling us on 132 032. Our Privacy Statement also provides information about how you can access and correct your personal information, and make a complaint. You do not have to provide us with any personal information or credit information but, if you don't, we may not be able to process your application.

Marketing Communications.

We will use your personal information to send you offers for products and services we believe may be of interest and value to you (including by email, SMS or other means) unless you have previously told us that you do not want to receive marketing offers from us. The products and services offered may be provided by us or one of our third-party partners. If you do not want to receive direct marketing offers from us, you can manage your marketing preferences in your online banking profile, let us know using the contact details in our Privacy Statement or follow the opt-out instructions in the message.

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If requesting a statement, note that a customer is able to access this via Online Banking. Otherwise, please use form PC2122.

The below fields are mandatory to be completed by the banker:						
Has the customer completed all of the required fields in this form?						
Westpac representative has verified signature(s) and that the form is signed in terms of authority held. Complete details below.						
OR						
Where this form has not been signed in Section 5, tick this box to confirm written authorisation (email/letter) has been obtained and signature(s) have been verified.						
Company CIS Key Has the compan	ny name been updated in CIS? Yes No					
Banker name	Phone number					
	()					
Email	Salary number					
Signature	Date					
X	/ /					

Westpac staff only: Once verified, please email to commercialcards@westpac.com.au