

BusinessChoice Facility closure request 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.

Print name

Complete this form if you want to close your BusinessChoice Cards Facility with the Facility number entered on this form ("Facility"), including all Cards issued to Additional Cardholders. Please tick () the box below and complete Section 1. Westpac will then close the company/Facility listed below and any remaining open Cards.

Facility number	
Note: This can be found on your BusinessChoice statement.	Business name
outstanding debts of the Facility, even afte	r termination, and it is the Business and Principal(s) (if any) remain liable for any retermination, and it is the responsibility of the Business and Principal(s) (if any) cility are destroyed and any existing recurring payments are cancelled.
Close the above BusinessChoice Facilit	y and all of the Cards attached to this Facility
Note: Cancelling this facility may require y	ou take further actions as a result of closing the facility including:
If you have a Business Credit Card Data charging you fees from the next statement.	Feed set up on this Facility, we'll deactivate your current Data Feed and stopent cycle.
• Any pending charges, fees, and interest Conditions.	may still be processed and must be paid according to your facility's Terms and
You will need to contact merchants to contact	ancel any recurring payments as these may be processed and charged acility's Terms and Conditions.
the Facility, even after termination. This m outstanding amount even if they do not be	and Business are liable to the Bank jointly and severally for all amounts under eans each of the Principal(s) and Business may be solely liable for the whole enefit equally under the Facility. If the Business constitutes more than one ntly and severally liable in accordance with the business' structure.
	to the Bank solely for all amounts under the Facility, even after termination. party (e.g. a partnership), each party is jointly and severally liable in
1. Business Authorisation - executed	by the Business named in this form
This form must be signed in accordance v	vith the current authorisation.
Westpac will not act on these instructions current authorisation and in the manner st	unless the signatories who sign this form are authorised to do so under the ated in the authorisation.
1.1 Authorisation (must be completed for al complete section 1.2).	Facilities. Joint and Several Liability Facilities must additionally
the application on behalf of the Business r constituted meeting of the Business in acc changes set out in the form.	declares the authorised signatories below have been authorised to execute equesting the changes set out in the form, by resolution passed at a legally cordance with its constitution/rules, and requests Westpac to make the
Business name	
ABN	ACN and/or ARBN
By authorised signatory 1	Date
X	/ /

Title

By authorised signatory 2		Date			
X		/ /			
Print name		J Title			
Note: If a Sole Trader, the application mexecuted by two partners. If a Compan or the company's constitution or the rebe executed in accordance with the assuncerporated Association (as applicable trustee. If the type of business is indicated the application must be executed by an	y, the application must placeable rules (as app sociation's constitution e). If a Trust, the applic ted as "Other" in Secti	be executed in accord plicable). If an Incorpor or the replaceable rule ation must be executed on 2 (e.g. Government	lance with the Corp ated Association, the es under the relevar d by the trustee(s) in Authority, Statutor	porations Act the application of law govern in their capacy of Corporation	2001 In must ling that city as In, etc.)
1.2 Principal Authorisation (where the	Facility has Joint & S	Several Liability)			
If your details are out of date, please	contact us before sign	ing the below.			
By signing below, the Principal(s) requ	ests Westpac make the	e changes set out in th	is form.		
Principal 1 Signature	Date	Principal 2 Signature		Date	
X	/ /	X		/	/
Print Name	Print Name				
PRIVACY STATEMENT					
All personal information and credit rela accordance with our Privacy Statement on 132 142. Our Privacy Statement also information. You don't have to provide able to process your application or requ	t which is available at <u>v</u> provides information a us with any personal ir	vestpac.com.au/privac about how you can ma	<mark>y/privacy-statemen</mark> ke a complaint or a	<mark>it</mark> or by calling ccess your pe	g us ersonal
Westpac use only					
The below fields are mandatory to be	e completed by the b	anker:			
Has the customer completed all of	f the required fields in	this form?			
Westpac representative has verified Complete details below.	•		n terms of authorit	ty held.	
OR					
Where this form has not been sign been obtained and signature(s) ha		() the box to confirm	written authorisation	on (email/let	ter) has
Banker name			Phone number		
			()		
Email			Salary number		
Signature		Date			
		/ /			
X					

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