



Participating Agency

New Zealand Government Card - Cardholder Service Request

This Service Request is subject to, and forms part of, the Card Services Order between Westpac New Zealand Limited (**Westpac**) and the Participating Agency listed below (**Card Services Order**) entered into under the Services Agreement relating to the supply of card services dated 24 September 2015 between the Ministry of Business, Innovation and Employment and Westpac (**Services Agreement**).

The Facility Administrator completes sections A, B and F. The Cardholder applicant completes sections C, D and E. If you have any questions or need help completing this, please call your Relationship Manager. Once completed, please take this together with any required identification to any Westpac branch.

Please add the following cardholder to our New Zealand Government Card Facility.

A. Facility Details Agency name _____

The Facility Administrator to complete Name of Facility (if different from Agency name) _____

B. Card Options Enrol card for Purchase Profile? Yes No

The Facility Administrator to complete Monthly credit limit for this card \$ _____ Purchase transaction limit (optional) \$ _____ per transaction

Cash advance access? Yes No If YES, cash transaction limit (optional) \$ _____ per cash advance

Would you like the card to be delivered by courier? Yes No

Please note: A **minimum** courier charge of \$10 applies, and will be charged to the card.

If YES, please supply a **physical address** for courier delivery NUMBER & STREET _____

SUBURB _____

TOWN/CITY _____

C. Cardholder details Mr Mrs Miss Ms Other PLEASE SPECIFY _____

The cardholder MUST complete ALL fields Name FIRST _____ MIDDLE _____

LAST _____

How would you like your name to appear (22 characters maximum including spaces)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of birth DD / MM / YYYY _____ Job title/Occupation _____

Mother's maiden name or Staff ID _____

Phone numbers WORK DDI _____ MOBILE _____

Work email _____

Work address NUMBER & STREET _____ SUBURB _____

TOWN/CITY _____

Work address PO BOX _____

D. Additional Information In accordance with the Services Agreement, the Participating Agency agrees to provide all information to Westpac which Westpac requires in order to meet its anti-money laundering and countering terrorism financing obligations, to comply with economic trade sanctions, or to comply with any Laws and promptly provide Westpac with the means of verifying that information.

E. Acknowledgement I understand that by completing this application I am providing personal information ('this information') about me which will be held securely by Westpac and its related companies and subcontractors. I certify that all this information supplied is true, correct and complete in every respect and understand that if it is not true, correct and complete, this application may be declined.

Cardholder to sign

Cardholder's signature _____ Date DD / MM / YYYY _____

F. Authority We authorise the issuance of a New Zealand Government Card to the cardholder detailed in section C.

Signature of authorised signatory _____ Date DD / MM / YYYY _____

Authorised Signatory FULL NAME _____

Position/designation _____

Signature of authorised signatory _____ Date DD / MM / YYYY _____

Authorised Signatory FULL NAME _____

Position/designation _____

G. Completion Please sign, date and scan this form and return to your Relationship Manager.

Important

To avoid any processing delay, please check the following:

- Has the Account Holder completed sections A and B?
- Has the Cardholder completed **ALL** of section C and signed section E?
- Have the Authorised Signatories signed and completed all fields in section F (must be the same signatories that signed the Account Holder forms).
- Has the Cardholder attached certified or verified copies* of identification documentation (New Zealand passport or New Zealand photo driver's licence) For a full list of acceptable documents, refer to westpac.co.nz/AML.

* A certified copy is defined as a document that has been certified as a true and correct copy by a 'trusted referee'. The certified copy must be taken directly from the original document version (i.e. not copied from a duplicate of the original document). A full list of trusted referees is available at westpac.co.nz/AML

Westpac use only

Card no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>								
Cardholder CRS no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Card Logo	<input type="text"/>	<input type="text"/>	<input type="text"/>						
Account Holder CRS no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Relationship no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>