

# Platinum Business Credit Card

PCT: 771RK700GP

PDT: 150/8

S/C: 714117S001

MR A: B03BOTH

**If you can answer YES to these questions, you may qualify for the Platinum Business Credit Card**

YES I have been trading for more than one year  
 YES I am over 18 years of age  
 YES my gross personal income is over \$75,000 p.a.  
 YES I have a good credit history

Are you an American Express Cardmember? Present  Former  Never

American Express Card number: **3 7 - -**

Are you an American Express Merchant? Yes  No

Merchant number **9 7 9**

Automatic enrolment in Membership Rewards Ascent

Title Mr Mrs Miss Ms Dr  
 First name \_\_\_\_\_ Middle initial \_\_\_\_\_  
 Surname \_\_\_\_\_  
 Date of birth / / 19 Driver's licence no. \_\_\_\_\_

Please provide details of your current residential address (PO box not acceptable).

Unit no. \_\_\_\_\_ Street no. \_\_\_\_\_  
 Street name \_\_\_\_\_  
 Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Time at this address Years \_\_\_\_\_ Months \_\_\_\_\_  
 Residential status Own  Mortgage  Rent  Living with parents

Home telephone no. \_\_\_\_\_  
 Work telephone no. \_\_\_\_\_

Mobile telephone no. \_\_\_\_\_  
 If you wish to receive product and service offers from us via email, please provide your email address below.

If less than 5 years at current address, please specify previous address.

Unit no. \_\_\_\_\_ Street no. \_\_\_\_\_  
 Street name \_\_\_\_\_  
 Suburb \_\_\_\_\_  
 State \_\_\_\_\_ Postcode \_\_\_\_\_

Please provide the name of a relative or friend not living with you

Name \_\_\_\_\_  
 Relationship to you \_\_\_\_\_  
 Home telephone no. \_\_\_\_\_

By signing below, I acknowledge that I have read and agreed to the Declaration overleaf.

Basic Platinum Business Credit Card applicant's signature Date / / 20  
 How would you like your name to appear on the Platinum Business Credit Card?

How would you like the name of your business to appear on the Platinum Business Credit Card?

Type of business Partnership/Trust  Sole trader  Company   
 Industry/Nature of business (please tick appropriate boxes)  
 Professional services  General services  Manufacturing  Retail  
 Travel and entertainment  Construction  Automotive  Restaurant  
 Other \_\_\_\_\_  
 Business legal name \_\_\_\_\_

Time trading with current ABN Years \_\_\_\_\_ Months \_\_\_\_\_

ABN \_\_\_\_\_

Business street address (no PO box)

Unit no. \_\_\_\_\_ Street no. \_\_\_\_\_ Street name \_\_\_\_\_  
 Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Business telephone number \_\_\_\_\_

Business trading figures

Latest tax year \_\_\_\_\_  
 Gross personal income \$ \_\_\_\_\_ .00 Latest total liability \$ \_\_\_\_\_ .00  
 Latest total assets \$ \_\_\_\_\_ .00 Latest total turnover \$ \_\_\_\_\_ .00

I authorise my accountant to provide details to American Express  
 Name of accountant \_\_\_\_\_

Accountant's telephone number \_\_\_\_\_

By signing below, the Business gives and agrees to the Declaration overleaf. The person signing below is an authorised signatory of the Business and has authority to bind the Business to the terms of the Declaration.

Authorised signatory's signature Date / / 20  
 Name \_\_\_\_\_

Job title: Owner  Managing Director  Partner  Finance Director   
 Other \_\_\_\_\_

Please send a Supplementary Card for the following person.

Title Mr Mrs Miss Ms Dr  
 First name \_\_\_\_\_ Middle initial \_\_\_\_\_  
 Surname \_\_\_\_\_  
 Date of birth / / 19 Driver's licence no. \_\_\_\_\_

Please provide details of your current residential address (PO box not acceptable).

Unit no. \_\_\_\_\_ Street no. \_\_\_\_\_  
 Street name \_\_\_\_\_  
 Suburb \_\_\_\_\_  
 State \_\_\_\_\_ Postcode \_\_\_\_\_

By signing below, I acknowledge that I have read and agreed to the Declaration overleaf.

Supplementary Platinum Business Credit Card applicant's signature Date / / 20  
 How would you like your name to appear on the Platinum Business Credit Card?

Please specify your preferred statement cycle

Statement cycle	0	1	2	3	4	5	6	7	8	9
Time within the month	2nd-3rd	4th-6th	7th-9th	10th-12th	12th-14th	16th-18th	18th-20th	22nd-24th	24th-26th	27th-29th

Please return your application form to: (Fax) 02 9271 2524 or (Post) Attn: Mel Casale, Small Business Services, GPO Box 1582, Sydney, NSW 2001.

## DECLARATION

**Important: The Business, the Basic Business Card Applicant and the Supplementary Business Card Applicant must read the information and sign overleaf.**

### To American Express<sup>®</sup> Australia Limited ("you" or "American Express"):

By signing on the previous page, the Business and the Basic Business Credit Card Applicant (together we, us or our) request you to issue Business Credit Cards to each Basic Business Credit Card Applicant and Supplementary Business Credit Card Applicant specified in the application, and we each declare and undertake to you that:

- The information given on the application is true and complete. We authorise you to check that information and authorise our accountants to provide and verify to you any further details requested concerning the information. We acknowledge that you rely on all such information and further details to consider the application;
- Each of us is financially solvent and able to pay our respective debts when due;
- If the application is approved, we will comply with the Business Credit Card Conditions that you will send to the Basic Business Credit Card Applicant with their Card (receipt of which will be taken to constitute receipt also by the Business) and to the Supplementary Business Credit Card Applicant and we will jointly and severally be liable to pay all fees, charges and other amounts under the Business Credit Card Conditions and this Declaration;
- If the application is approved, the Basic Business Credit Card Applicant who has selected Membership Rewards will comply with the Membership Rewards Terms and Conditions that you will send to them;
- We understand that the Business and the Basic Business Credit Card Applicant will be jointly and severally liable for all charges incurred with each Basic Business Credit Card;
- We understand that charges made using a Supplementary Business Credit Card will be the responsibility of the Business, the Basic Business Credit Card Applicant and the Supplementary Business Credit Card Applicant(s) even though the charges will be billed to the account of the Business and the Business Credit Card Applicant;
- We understand that the Business, the Basic Business Credit Card Applicant and each Supplementary Business Credit Card Applicant will be jointly and severally liable for all Supplementary Business Card charges;
- We agree to pay to you annual fees as follows: \$160 for each Basic Business Credit Card and \$0 for each Supplementary Business Credit Card (unless that fee is waived by you); and
- You may produce this application or a copy or other reproduction of it as evidence of our application for the Card and our agreement to this Declaration.

**Note: The Business and the Basic Business Credit Card Applicant will be jointly and severally liable to American Express for all obligations incurred on each Business Credit Card issued.**

### Invitation by each Basic Business Credit Card Applicant to you:

We invite you and your agents and your preferred alliance organisations (including insurance companies) to use each of our personal information for marketing purposes. This includes contacting us by telephone, mail or email to discuss and agree any purchase of goods or services from an American Express company or your products and of any third party providing products jointly marketed with American Express. We understand that we can call 1300 366 220 if we want to withdraw this invitation and remove our names from your marketing lists or to cease receiving telemarketing calls. This invitation will remain in place until I withdraw it or until I cease being an American Express Cardmember.

### Authority to American Express under the Privacy Act:

To assess this application, and if it is approved, to establish and manage the Card account, I/we understand American Express needs to:

- Collect personal information about me/us in this application form and from other sources; and
- Obtain my/our agreement in relation to the handling of my/our personal information.

If I/we do not provide the information requested or give my/our agreement overleaf, I/we understand American Express may decline my/our application.

The American Express Privacy Policy Statement sets out policies on management of personal information. In accordance with the Privacy Act, any person may access personal information about them held by American Express, and advise if they think it is inaccurate, incomplete or out of date.

To arrange access to personal information, request a copy of the American Express Privacy Policy Statement or enquire generally about privacy matters, write to The Privacy Officer, American Express House, 12 Shelley Street, GPO Box 1582, Sydney NSW 2000.

In this section, 'personal information' means information about me/us, including about my/our financial circumstances, my/our creditworthiness, credit history, credit standing, credit capacity, my/our use of the Card and conduct of my/our account with you.

I/We agree that, subject to the Privacy Act, you and your agents may do the following (and if this application is successful, this agreement continues until such time as any credit provided to me/us is repaid):

- Obtain credit reports about me/us from credit-reporting agencies to assess this application or to collect overdue payments from me/us, and obtain personal information from a business that provides commercial creditworthiness information.
- Disclose personal information to credit-reporting agencies before, during or providing credit to me/us. This includes, but is not limited to:
  - the fact that I/we have applied for a Card and the credit limit, and that you are a credit provider to me/us;

- advice about Card payments at least 60 days overdue and which are in collection (and advice that payments are no longer overdue);
- advice that cheque(s) drawn by me/us, or Direct Debit requests to my/our financial institution account which I/we have authorised you to make, which are more than \$100 have been dishonoured more than once;
- your opinion that I/we do not intend to meet my/our credit obligations or that I/we have committed some other serious credit infringement; and
- that credit provided to me/us has been paid or otherwise discharged.
- Exchange personal information with credit providers named in this application or in a credit report issued by a credit-reporting agency. This is for purposes including but not limited to:
  - assessing my/our creditworthiness, this application and any subsequent application by me/us for credit;
  - notifying other credit providers of a default by me/us;
  - exchanging information about my/our Card account where I/we am in default with other credit providers;
  - your approval process as to any transactions I/we wish to make with the Card; and
  - your administration of my/our account.
- Exchange personal information with any person whose name I/we give you from time to time. This includes, for example, for the purpose of confirming my/our employment and income details with any employer, landlord/mortgagee, accountant, financial adviser or tax agent named in this application.
- If I/we am in default under my/our Card account, notify and exchange personal information with your collection agent.
- Transfer personal information confidentially to your related companies and other organisations which issue or service American Express Cards or provide services to you, subject to appropriate conditions of confidentiality. This includes transferring personal information to USA or other countries for data processing and servicing.
- Monitor and record my/our telephone conversations with you from time to time in order to train your staff and control your service quality.
- Provide personal information to any organisation whose name, logo or trademark appears on this application or on the Card issued to me/us for marketing, planning, product development and research purposes, and seek from and exchange with such organisations personal information about me/us.

I/We also agree that where I/we have provided you with information about another individual in this application form, I/we will make sure that the individual is aware of:

- my/our supplying their information to you and the purposes why you have collected the information;
- their ability to access that information in accordance with the Privacy Act (and advise you if they think the information is inaccurate, incomplete or out of date); and
- the contact details of your Privacy Officer.

### Business Purpose Declaration:

I/We declare that the credit to be provided to me/us by the credit provider is to be applied wholly or predominantly for business or investment purposes (or for both purposes).

### Important

You should **NOT** sign this declaration unless this loan is wholly or predominantly for business or investment purposes.

By signing this declaration you may **lose** your protection under the Consumer Credit Code.

Please allow up to 21 working days for application processing.

Contact American Express for Card enquiries on 02 9271 4365

8am–7pm Sydney time, 7 days.

GPO Box 1582, Sydney NSW 2001

[americanexpress.com.au](http://americanexpress.com.au)



**Small Business  
Services**

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