

# Handkey Functionality Request Form



Please note:

- We reserve the right to decline this request.
- You must provide a valid reason as to why you require the Handkey Functionality on your merchant terminal.
- Please send the completed form to:  
Fax no: **1300 765 738** or Email: **MerchantCompliance@cba.com.au**

## Section 1 – Your details (all details in this section must be completed)

Contact name

Contact number

Contact email

Trading name

Merchant number(s)

Terminal number(s)

Reason for requiring Handkey functionality

## Section 2 – Service requirements

Handkeyed transactions do not require you to verify a signature or PIN to be processed. This level of anonymity provides an environment in which fraudsters regularly operate. Most credit card fraud is committed in a card not present environment, when the physical credit card is not made available to the merchant. Instead, card details may be provided over the phone or internet. The Commonwealth Bank of Australia website has a 'Protecting you and your customers' page available. The information provided will assist our merchants in understanding the risks involved with handkeyed transactions, as well as actions merchants can take to reduce the risk of fraud.

This information can be found at:

<https://www.commbank.com.au/business/merchant-services/merchant-information-centre.html>

## Section 3 – Declaration and Authorisation

By signing this document, you accept all responsibility for the risks involved in having the Handkey Functionality enabled on your merchant facility. Additionally, you agree to repay any costs or expenses which may be incurred against the bank as a result of chargebacks (cardholder-disputed transactions) related to your merchant facility.

You also acknowledge that if any cardholder dispute is not satisfactorily resolved or you don't provide supporting evidence within the required time frame, the disputed amount plus a chargeback fee will be debited to your bank account.

**Please note:** This form must be completed and signed by the signatory/signatories of the Merchant Facility

Name

Position

Signature

Date

Name

Position

Signature

Date