

Credit Card - Additional Cardholder Application

Customer Instructions Complete sections 1 to 3 below * Denotes mandatory field	
Section 1 – Principal cardholder's details	
Title Mr Mrs Miss N Full given name(s)	Ms Other Surname
Other names known by (if any)	Date of birth
Principal cardholder's residential address (l	PO Box is not acceptable)
	State Postcode
Home phone number Work phone	number Your MasterCard OR Visa card account number
Section 2 - Additional cardholder's detail	Is (applicant must be 16 years or older)
Title Mr Mrs Miss N	Ms Other
Full given name(s)	Surname
g., 2.,	
Other names known by (if any)	Date of birth
Additional cardholder's residential address	(PO Box is not acceptable)
	State Postcode
Home phone number Work phone	number
documentation to complete a You may use one of the follow Passport Australian Drivers/Firearms Proof of Age card Or two different documents for the council rates or utility bill or two donly one of these documents for the collect the information in this form to id Financing Act 2006 and provide you with act the information in the complete act to the passenger for the following for the collect the information in this form to id Financing Act 2006 and provide you with act the collect the information in the collect the passenger for the following for the follow	Branch number Account number any CommBank branch where you will need to provide original identification a customer identification check. wing documents which contains your photo: licence rom this list: ar ATO assessment notice or overseas drivers licence as may be used) lentify you in accordance with the Anti-Money Laundering and Counter-Terrorism dditional cardholder access. For more information about how we collect and a you can access or correct your information or contact us with any feedback,
h) Signature of additional cardbolds:	
b) Signature of additional cardholder	Date
To X	

Section 3 - Principal cardholder's declaration - please read and sign below

I understand you will charge to my card account the amounts of any transactions the additional cardholder makes and acknowledge that, as the principal cardholder, I am responsible in accordance with the Credit Card Conditions of Use for all transactions made on this account by the additional cardholder. I also acknowledge that the additional cardholder may select his/her own Personal Identification Number (PIN), access the card account electronically and also obtain information about the status of my account and transactions made on my account.

I understand that I can ask you to remove access to my account by the additional cardholder and place a stop on the account by attending a branch or by calling you on 13 2221. I understand that if I do this you will cancel all cards on the account, give me a new account number and issue new card(s) to me alone. I also understand that while you will use reasonable efforts to process my request promptly, a stop placed on my account will not take full effect immediately and that I will continue to be liable for any of the following transaction made by an additional cardholder:

- · transactions made before you process the stop request;
- transactions to purchase goods and services at a price below a merchant's authorised floor limit, until I have taken all reasonable steps to have the additional card destroyed or returned to you.

I acknowledge that the name of individual persons given to the Bank are true and correct and that the law prohibits the use of false names, as well as the giving, use or production of false and misleading information or documents in connection with the provision of financial services and the making, possession or use of a false document in connection with an identification procedure.

Signature of Prince	cipal cardholder	Date					
Bank use only							
Bank or Agent use – Identification details (e.g. passport, driver's licence details etc.) must be completed in all cases where customer identification is obtained.							
Additional card	nolder Existing accou	unt number		CIF			
Document type	Document number	Name on document	Place of issue	Issue date	Expiry date		
Verification has been performed for the customer Full name, and Date of birth, or Residential address Bank Officer's name					Staff number		
Bank Officer's signature Date							
Lodgement branch L/- (Guide only)							
Issue CommSee Request Work Item:							
Select 'Request' option from Customer Chevron.							
Select 'Credit Cards' from Category field. Select 'Additional Cardholder' from Request Type.							
Select 'Add Additional Cardholder' from Template.							
Note: Interactions must be for the Primary cardholder's CommSee profile.							
CommSee Request Work Item must include the additional card applicant's full name (including title), Date of birth and CIF number.							

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