

Business Credit Cards - Add a Cardholder

NAB Low Rate Business Card

NAB Business Card • NAB Rewards Business Signature Card

NAB Qantas Business Signature Card

Please com	plete Application form in fu	ull in black or blue pe	n using CAPITAL LI	TTERS and 🗡 where	e appropriate.	
	rn the completed form to y 9992, Melbourne VIC 8060.	our nearest NAB bran	ich, your Banker, o	r send to Cards Fulfil	ment Team,	
Section A	Business details					
Registered I	Business/Company name		Facility	billing account numbe	er	
				0		
Business ad	dress		L			
Suburb				State		Postcode
Business tel	lephone number	Email address				
()						
Section B	Business details					
	Information for NAB Reward	de Rusiness Signatur	e Card			
	arned using either of these ca	Ū		alance		
	Information for NAB Qantas					
	ntas Points, the business mus the business' points balance.		Qantas Business Rev	vards Program. All poi	nts earned usir	ig either of these cards are
	iness Rewards membership a I, go to, qantasbusinessrewa		nts are subject to Q	antas Business Rewar	ds Terms and C	onditions. For more
	ining fee usually applies but v 1/nabqbr or calling 13 74 78	will be waived for the l	ousiness taking a ne	w NAB Qantas Busine	ss Signature Ca	rd who join by visiting
Important i	information for new cardho	lders				
	AB's regulatory obligation all and a contract of the second second second second second second second second se			cards must be identif	ied in accordan	ce with the NAB Ltd Anti-
-	completed by visiting your n	-	-			
			C .			
Cardholder						
Owner Oitle	Employee Surname		Given name/s			Date of birth (DD/MM/YYYY)
Posidontial	addross					
Residential	aduress					
Suburb			State	Postcode	Mobile	
Please spec	ify cardholders credit limit (M	1in. \$1.000)				
\$		Allow Cash A	dvance is Cardholder? □Ye	es 🗌 No		
Cardholder	· 2					
Owner	Employee					
Title	Surname		Given name/s			Date of birth (DD/MM/YYYY)
						/ /
Residential	address					
Suburb			State	Postcode	Mobile	
Please spec	ify cardholders credit limit (M		duanaa			
\$		Allow Cash A access for th	dvance is Cardholder?	es 🗌 No		

Cardholder 3

Owner	Employee								
Title	Surname	Given name/s			Date of birth (DD/MM/YYYY)				
					/ /				
Residential a	address								
Suburb		State	Postcode	Mobile					
Please speci	Please specify cardholders credit limit (Min. \$1,000)								
\$		Allow Cash Advance access for this Cardholder?	s 🗌 No						
Cardholder 4									
Owner	Employee								
Title	Surname	Given name/s			Date of birth (DD/MM/YYYY)				
					/ /				
Residential a	address								

Suburb		State	Postcode	Mobile	
Please specify cardholders credit limit	: (Min. \$1,000)				
\$	Allow Cash Ac	dvance s Cardholder? □`	/es 🗌 No		

Cardholder consent

Each cardholder to read and to provide consent by signing as provided below

I consent to the issue of a NAB Commercial Card ('card') in my name for use as agent of the Customer detailed in Section A. I acknowledge I will be provided with Conditions of Use for the card which govern my use of the card.

For NAB Rewards Business Signature Cards

I acknowledge I have no entitlement to NAB Rewards Points earned in connection with my card. Any points earned in relation to my card will be credited to the facility owner's points balance.

For NAB Qantas Business Signature Cards

I acknowledge I have no entitlement to Qantas Points earned in connection with my card. Any Qantas Points earned in relation to my card will be credited to the Business' Qantas Business Rewards account.

Cardholder 1 signature	Date (DD/MM/YYYY)	Cardholder 2 signature	Date (DD/MM/YYYY)
×	/ /	×	/ /
Cardholder 3 signature	Date (DD/MM/YYYY)	Cardholder 4 signature	Date (DD/MM/YYYY)
×	/ /	×	/ /

Customer (Company/Business) Consent

The Customer requests the issue of a card (and Personal Identification Number [PIN]) to the cardholder/s above (or nominated in connection with this application) in accordance with the customer's NAB Commercial Cards Facility Conditions. In the event the cardholder/s has nominated other accounts to be attached to the card under the heading 'Nominated account details', the customer hereby authorises those accounts to be accessed by use of the card and Personal Identification Number issued to the cardholder/s.

Signature of Sole Proprietor/Director/Partner	Date (DD/MM/YYYY)	Signature of Director/Partner	Date (DD/MM/YYYY)
×	/ /	×	/ /
•••		· ·	

Persons authorised to sign for the Business/Organisation Entity Person authorised to sign Sole Trader Sole Proprietor Partnership All Partners Company or Trust with Company Trustee Any 2 Directors and Company Secretary or Sole Director and Sole Company Secretary Trust with individual Trustee Each individual Trustee

NAB use only

	Identification and verification completed			Customer number (9 character)	Identification and verification completed		Customer number (9 character)	
Applicant/Business			Applicant/Bu	Applicant/Business				
Cardholder 1		Yes	🗌 No		Cardholder 3	3 Yes	🗌 No	
Cardholder 2		Yes	🗌 No		Cardholder 4	¥ Yes	🗌 No	
eForm lodged	l	Yes	No					