



Credit Card Application

CC1

Version 1.2

UNSW
AUSTRALIA

This form is used to request a UNSW credit card

This form should be typed rather than handwritten (apart from the signature fields)

Send the completed form to Accounts Payable by scanning it and emailing it to cardhelp@unsw.edu.au

The applicant must bring the original form & provide identification at the time of card collection (staff id, drivers license or passport)

APPLICANT'S DETAILS

Title: _____ First Name: _____ Middle Name: _____ Last Name: _____

Position: _____ Fac/Div: _____ School/Dept: _____

Employee ID: _____ Email: _____ Male/Female: _____ Date of Birth: _____

Your home address is required because the bank will send the PIN notification to this address.

The bank sends a 'one time' password at the time of purchase when buying online. Please specify how you would like to receive the password.

Home Address: _____

Choose one:

Mobile (preferred) Number: _____

Email (to the email address specified above)

City: _____ State: _____ Postcode: _____

CARD LIMITS

Before completion of this form you need to ensure you have Financial Delegation.

What is your financial delegation amount? _____ *(Must be equal to or above the transaction limit).*

If you do not hold a financial delegation please apply for one first at [myUNSW](#).

Per Transaction Limit: _____ Monthly Limit: _____

The per transaction limit cannot exceed your financial delegation. The standard limits are \$3,000 per transaction and \$10,000 per month.

DEFAULT CHARTFIELD

These chartfields will be loaded automatically when reconciling each expense in NS Financials, but can be changed as required.

Fund: _____

Dept. ID: _____

Project (if any): _____

RECONCILIATION OF TRANSACTIONS

Before completion of this form you must obtain access as a credit card reconciler. To do so please go through the IT Service Desk (itservicecentre@unsw.edu.au)

Will you be reconciling your own card? _____ *If no, please enter the details of the reconciler/s below. Reconcilers require access to NS Financials.*

Reconciler Name 1: _____ Employee ID: _____

Reconciler Name 2: _____ Employee ID: _____

AGREEMENT TO CREDIT CARD PROCEDURE

UNSW reserves the right to suspend or cancel a credit card where any of the below responsibilities are not fulfilled:

- If my card is lost or stolen I will report it immediately to the bank as well as the Card Administrator.
- I agree not to allow another person to use the credit card.
- I agree not to use the credit card to make cash withdrawals or direct debits.
- I agree to keep the credit card and PIN secure and confidential at all times.
- I agree not to use the credit card for expenses exceeding \$3,000 (excluding GST) apart from travel and accommodation.
- I will not split single purchases into multiple payments to avoid the transaction limit of my card.
- I agree to use the credit card to make purchases for UNSW purposes and not to pay for personal expenses.
- I agree to supply tax invoices for all transactions on my credit card and attach them to the statement (or receipts for amounts under \$75 +GST where a tax invoice is not available).

Applicant's Signature:

Date: _____

By signing this form the Applicant confirms that they will comply with UNSW's [Credit Card Procedures](#) at all times.

APPROVALS

The Card Supervisor must monitor the Applicant's usage of the credit card, and is usually their direct manager.

Supervisor's Name: _____

School/Dept: _____

Position: _____

Supervisor's Signature:

Date: _____

X

By signing this form the Supervisor confirms that they will comply with UNSW's [Credit Card Procedures](#) at all times.

The Approver must be the Head of the Faculty / Division to which the Applicant belongs.

Approver's Name: _____

Faculty / Division: _____

Position: _____

Approver's Signature:

Date: _____

X

ACCOUNTS PAYABLE USE ONLY

Credit Card Application approved.

Authorised Signatory Name: _____

Identity verified.

Verifying Officer Name: _____

Authorised Signatory:

Date: _____

X

Authorised Verifier:

Date: _____

X

CARDHOLDER ACKNOWLEDGEMENTS AND CONSENT (to be signed upon collection of card)

I, the person named in the UNSW CC1 form as the Application consent to the Issue of a Credit Card in my name for my use as agent of the Principal named on this form.

I acknowledge that use of the Card issued will be governed by Conditions of Use which will accompany the Card and by which I agree to be bound. I specifically acknowledge that I shall incur no personal liability in use of the Card except where I use the Card after Receipt of notice of its cancellation in which event my liability will be joint and several with that of the Principal. I further acknowledge that the Card will only be used by me for business purposes and not for private or personal purposes.

Privacy Consent

I agree that Westpac Banking Corporation ("Westpac") and any other member of the Westpac Group (the "Parties") may exchange with each other any information about me including:

- any information provided by me in this document
- any other personal information I provide to any of them or which they otherwise lawfully obtain about me and;
- transaction details or transaction history arising out of my arrangement with the Bank.

If the Parties engage anyone (a "Service Provider") to do something on their behalf (for example a mailing house or data processor) then I agree the Parties and the Service Provider may exchange with each other any information referred to above. The Bank might give any information referred to above to entities other than the Parties and any Service Providers where it is required or allowed by law or where I have otherwise consented. I agree that any information referred to above can be used by Parties and any Service Provider to issue the Card to me and for account administration, planning, product development and research purposes. I understand that I can access most personal information that the Parties hold about me (sometimes there will be a reason why that is not possible, in which case I will be told why). I understand that if I fail to provide any information requested in this form, do not agree to any of the possible exchanges or uses detailed above, this request may not be accepted by the Bank. To find out what sort of personal information the Parties have about you, or to make a request for access, please contact Westpac on 132 032. The Westpac Group means Westpac Banking Corporation and its related bodies corporate.

Members of the Westpac Group would like to be able to contact you, or send you information regarding other products and services. The Conditions of Use will explain what action to take if you do not wish to receive this information.

Cardholder Name: _____

Are you known by any other name? _____

Cardholder Signature:

X

Date: _____

Note: It is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) to knowingly provide false and misleading information.