



customer account

Account Details (All applicants to complete relevant sections)

- ☐ Company ☐ Partnership ☐ Sole Trader
☐ Incorporated Club/Association ☐ Other: _____

Registered Company Name (in full):

Company ABN:

Company ACN:

Trustee (if applicable):

Business Trading Name (in full):

Trading Address:

Postal Address:

☐ As above ▲

Contact Name:

Position:

Telephone Number (landline):

Mobile Phone:

Email Address:

Type of business / industry:

Date Business Commenced, if under 3 years, details of owners'/directors' previous experience:

Registered for GST? ☐ Yes ☐ No

PROMO CODE:
(if applicable)

Please choose a Password for Telephone Verification

Credit Limit Requested

Please calculate the **total** amount required for all cards on your account per six week period.



Example: 3 cards x \$200 each per week = \$600

\$600 x 6 weeks = **\$3,600 Total Credit.**

Total Credit Limit Requested

\$

References (To be completed by all business applicants including Sole Traders)

Name of External Accountant:

Telephone Number (landline):

Trade Reference 1:

Telephone Number (landline):

Trade Reference 2:

Telephone Number (landline):

Payment Options

☐ **OPTION 1 - Direct Debit Request (14 days from statement date)**

Request and Authority to debit the account named below to pay WEX

Surname or Company:

Given Names or ABN/ARBN:

("you")

We request and authorise WEX (Direct User Identification Number 028424) to arrange, through its own financial institution, for any amount WEX may debit or charge us from time to time to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below and paid to WEX, subject to the terms and conditions of the Direct Debit Request Service Agreement.

Insert the name and address of the financial institution at which the account is held
 Financial Institution Name:

Address:

Insert details of account to be debited

Account Name (ie. JOHN SMITH):

BSB:

Account Number:

Acknowledgement

By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and us as set out in this Request and in this Direct Debit Request Service Agreement. Debit Payments will be made fourteen days after the issue of a billing advice.

Before signing, read the Direct Debit Request Service Agreement below ^

(for a company, sign and print full name and capacity for signing)

Signature:

Date:



Full Name:

Capacity (ie. Director):

Address:

☐ **OPTION 2 - Payment by Credit Card**

I/We authorise WEX to debit on an ongoing basis the credit card detailed below with the balance due in accordance with the Terms and Conditions of Account. (Please note, a billing administration fee of 1.3% applies to all payments)

Name on the card:

Credit Card Number:

☐ VISA

☐ MASTERCARD

Expiry Date:

Signature:

Date:



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Statements will be sent electronically to your nominated email address.



☐ Please send me paper statements

^Direct Debit Request Service Agreement This agreement sets out the terms on which you have authorised WEX to arrange for amounts owing to WEX to be debited from your account at your financial institution. 1. Debiting arrangements - Our ('WEX') obligations to you: The details of your debiting arrangement are shown in your Direct Debit Request (DDR). By you signing the DDR, you authorise us to debit the amounts that become payable to us from your account at the financial institution written on your DDR. We will only arrange for funds to be debited from your account if we have sent to the address stated on the DDR a billing advice specifying the amount payable by you to us and when it is due. If a debit date falls on a day which is not a business day, the debit will be made on the next business day. We will keep your direct debit records and account details confidential, except where the disclosure of certain information is required by law or is necessary for the purposes of this agreement. We may vary any details of this agreement at any time after giving you 14 days written notice. 2. Your rights - You can discuss, and in some instances change, arrangements under the DDR by phoning us on 1300 651 425. If you wish to stop, defer or cancel the payments under the DDR, you must notify us in writing at least 3 business days before the next debit date. If you consider that there has been an error in debiting your account, you should call us on 1300 651 425 in the first instance. If we cannot resolve the matter, you can still refer it to your financial institution. 3. Your responsibilities - It is your responsibility to: • ensure that your financial institution accepts direct debits on your nominated account (direct debiting may not be available on all accounts); • ensure that there are sufficient funds in your nominated account by the due date to enable debits to be made by us. If debiting is unsuccessful due to insufficient funds, we reserve the right to re-draw at such times as we determine and you may be charged a fee by us and your financial institution; • ensure that your account details on your DDR are correct and that the authority given to us to debit your nominated account is consistent with the account authority or signing instructions held by your financial institution for that account; • advise us if your nominated account is transferred, closed or any other account details change; • arrange a suitable payment method if your debiting arrangements are cancelled; and • ensure that any goods and services tax on a supply made in connection with this agreement incurred by us is payable by you.

Card details

Business Trading Name to appear on all cards (max. 26 characters):



Please set out details below of all persons to whom you want Coles Customer Account Identification Cards to be issued on your account (if insufficient space, please enclose a separate list)

Name (up to 20 characters)

Acknowledgements and Privacy Act Authorisations Please call 1300 651 425 for a full set of Terms and Conditions of Account which govern the use of the account and Coles Customer Account Identification Cards. Please read this section carefully and sign the declaration at the end of the section. Acknowledgements Definitions Except for the purpose of the declarations, the following definitions apply throughout the application form: you or your means the applicant or applicants named in this application. Us or we means WEX Australia Pty Ltd. By making this application, you: 1. request and authorise us to open an account in your name and to issue Coles Customer Account Identification Card/s for use on the account to such persons as you have requested; 2. acknowledge that we may approve the application and make an offer to you to provide an account to you on the terms and conditions set out in the Coles Customer Account Identification Card Terms and Conditions of Account (which will be supplied to you when an account is opened) by opening an account in your name; 3. acknowledge that by signing the application form, signing a Coles Customer Account Identification Card, or using, or attempting to use a Coles Customer Account Identification Card (whether by you or any other person authorised by you) you will be taken as having unconditionally accepted the Coles Customer Account Identification Card Terms and Conditions of Account as governing the use and operation of your account and any and all Coles Customer Account Identification Cards issued by us for use on the account; 4. agree to provide a copy of the Coles Customer Account Identification Card Terms and Conditions of Account (as in force from time to time) to any person authorised by you from time to time to use a Coles Customer Account Identification Card; 5. represent and warrant that the information provided in this application is true, correct and complete and you authorise us to check that information; 6. acknowledge that we rely on this information to consider your application; 7. acknowledge that a once only joining fee of \$50 per account applies; 8. authorise us to bill the account for monthly fees (as set out in the Coles Customer Account Identification Card Terms and Conditions of Account) which are subject to variation from time to time by notice to you in writing; and 9. authorise us to contact your bank, financial controller or accountant, trade references, contractors and landlord to verify and obtain details pertaining to this application. Privacy Act Authorisations By making this application you are providing personal information to enable us to assess your application for a Coles Customer Account Identification Card . Without this information, we may not be able to process your application. By submitting this application you agree that, subject to the Privacy Act 1988, for the primary purpose of assessing your application and administering the Coles Customer Account Identification Card arrangements, we may: 1. give to a credit reporting agency personal information about you contained in the application or otherwise acquired by us and which is permitted to be kept on a credit information file; 2. obtain a consumer credit report containing information about you from a credit reporting agency for the purpose of assessing your application or for the purpose of collecting overdue payments relating to commercial credit provided by us to you; 3. exchange information about you with any credit providers named in this application or named in a consumer credit report issued by a credit reporting agency: 3.1 to assess an application for credit by you; 3.2 to notify other credit providers of a default by you; 3.3 to exchange information with other credit providers as to the status of your account where you are in default with other credit providers; or 3.4 to assess your credit worthiness; and you understand that the information exchanged can include anything about your credit worthiness, credit standing, credit history or credit capacity that credit providers are allowed to exchange under the Privacy Act 1988; 4. produce this application or a reproduction of it as evidence of this application for Coles Customer Account Identification Cards and of the Acknowledgements; 5. use your personal information for additional purposes including planning, product development, partner offers and research; 6. provide you with, or arrange for a partner to provide you with, marketing information including special offers for cardholders (if you do not wish to receive any marketing offers, please call us on 1300 651 425); 7. exchange information about you with your nominated referees any person who has introduced you to us; 8. disclose to our related entities, alliance partners and service providers including bankers, electronic interface switch providers, roadside assist service providers, printers, insurance companies, mail houses, solicitors, auditors, professional advisers and debt recovery agents with whom we have a contract such of the personal information as is necessary by us to enable us to manage your account or to promote our or their products and services; 9. You acknowledge and agree that we may disclose Coles Group Limited (ABN 11 004 089 936) ("Coles Group Limited") any of your personal information including the outcome of your application. You specifically authorise Coles Group Limited to seek access to collect and use your personal information and acknowledge that the operation of this clause will extend to any person issued with a card on the applicant's account and you warrant that we will have permission of any cardholder on your account to give the above information to Coles Group Limited. We acknowledge that you may, without charge, request a copy of any personal information about you held by us by writing to us at WEX Australia Pty Ltd GPO Box 5342 Melbourne VIC 3001. **You can obtain more information about how we collect, store, use and disclose personal information by accessing our Information, Privacy and Data Security Statement on our website at www.colescustomeraccount.com.au.**

I/We are duly authorised to sign on behalf of the applicant.

SOLE TRADER - Full details for one signatory required

PARTNERSHIPS - Full details and two signatures required

ALL OTHER ENTITIES - Name, position, signature and date only

Name (Printed):

Position:

Date of Birth:

Driver's Licence Number:

Signature:

Date:



Name (Printed):

Position:

Date of Birth:

Driver's Licence Number:

Signature:

Date:



Important: This section must be completed and signed for your application to be processed.

07/03/14 WEX Australia Pty Ltd - ABN 68 005 970 570