

EFTPOS APPLICATION FORM

Instructions Please complete the application in full. If y	ou are new to bank, complete	e the following require	ments.		
	ion Certificate (TIN) Incorporation - IPA		ng Site	☐ Termination	
FAINT IN BLOOK CAPITAL LETTERS III a	olde of black pell to complete	the required sections			
Section A: Merchant Details					
Registered Company or Business Name: (For Education Payments) School / Institution Name:				or Business Number:	
	Country:		Postal Code:		
Nominated Mobile:	Nominate	d Email:			
Principle Place of Business Sect/Lot: Province/State:					
Contact Name of Contact Person: Mobile:					
Section B: Business Details					
Business Type					
Sole Trader Company Partnership Franchise	☐ Limited Liability ☐ Corporation	☐ Non-Pro ☐ Governm	fit Organization nent	Superannuation Others	
Industry Type					
Airline Insurance Electronics / IT Finance Education Childcare / Primary High School / Secondary Tertiary / Colleges	 ☐ Hotel / Accommodation ☐ Travel Agent ☐ Internet Service Provider (☐ Transport & Logistics ☐ Real Estate & Property Definition 		☐ Charity ☐ Import / Exp	Trade Store, Supermarkets) t Entity	
Section C: Payment Methods					
i. How do you receive payments for your	good / services?			Monthly Annua.	lly
☐ Cash ☐ EFTPoS	☐ Internet Banking	☐ Cheque ☐	State value:	K	
ii. How do you pay for your business expe	enses?			Monthly Annua	lly
☐ Cash ☐ EFTPoS	☐ Internet Banking	☐ Cheque ☐	State value:		
Section D: Nominated Accounts			TOTAL.		
If you are applying for BillPay, Mobile Mero Nominated Account	,	•	, ,		
Branch Account Na	ame BSB/B	ranch Code Acco	unt Number	Preferred Service	

Section E: Standing Order

Complete the standing order for GPRS Rental fee (K50.00 per device).

				Α			

Branch Account Name BSB/Branch Code Account Number

Standing Order Authority

Account Name Account Number Amount Payment Due TID S/O No.

Total

I/We understand that the bank accepts this order only upon the following conditions, namely:

- (i) This order is subject to the merchant facility arrangement between me, the Merchant, and the bank in relation to my Merchant bank account.
- (ii) The bank may in its absolute discretion conclusively determine the order of priority of payment pursuant to this or any other order or cheque which I may give to the bank or have the bank draw on my merchant account.
- (iii) This order will remain effective not withstanding death, bankruptcy or liquidation of my merchant business or the revocation thereof by any means whatsoever until notice of such death, bankruptcy, liquidation or revocation is received by the bank.
- (iv) This bank is obliged by this order to debit the account on the day nominated above, and if warranted, may at its sole discretion debit the merchant account or a related account on any other day after the day nominated for fees not rendered to the bank.

Customer Authorization

Full Name:		Full Name:	
Position: -		Position:	
Signature:	Date:	Signature:	Date:
Full Name:		Full Name:	
Position: -		Position:	
Signature: _	Date:	Signature:	Date:

Section G: Indemnity Agreement

If you are applying for EFTPoS devices, please read Section G and H before signing.

Indemnity

The Indemnitor undertakes to indemnify BSP from any suit, liability, claim, action, loss, or damage BSP may suffer as a result of claims, demands, costs, or judgments against BSP arising from:

- · The Indemnitor failing to adhere to the terms and conditions of the Merchant Contract; or
- The Indemnitor, its employees, contractors, agents or invitees acting dishonestly or illegally when using the Terminal; or a dispute between the Indemnitor and a Cardholder over the supply, use, quality or fitness of goods, services or the payment of cash; or
- Chargeback situation where a dispute is raised by a cardholder or the cardholders issuing bank disputing transaction that took place at a Terminal installed
 with the Indemnitor; or
- BSP processing an Invalid Transaction initiated by the Indemnitor.
- The Indemnity stated in this Agreement survives the termination of the Merchant Contract.
- · Any amounts due and payable under this indemnity are payable on demand.
- BSP is not liable for any Invalid Transaction or losses or inconveniences the Indemnitor incurs or those of a Cardholder or any other person should a Terminal
 or communication line be faulty.
- The Indemnitor is liable for Invalid Transactions or any loss arising from unauthorised use of the Indemnitor's refund password.

Commencement

This Indemnity Agreement commences immediately on the date on which the Indemnitor accepts the installation of a Merchant Facility or when a Merchant Contract is signed (whichever occurs first) and shall continue even after termination of the Merchant Contract.

Page 2 of 4 EFTPoS Application form

Notice

- Any notice or other document to be served on or delivered to any party pursuant to this Agreement may be delivered to the party's physical address or by email (as the case may be) as notified in this application by the merchant.
- Any notice or document to be delivered under this Agreement shall be deemed to have been duly served or given if personally delivered at the time of delivery,
 if sent by post on the day following the date of its posting or if sent by facsimile on the day following the day on which it is sent when correct answer back is
 received.

Assignment and Variation

- · The Indemnitor shall not assign or vary this Agreement.
- BSP shall inform the Indemnitor in writing if it varies and/or assigns this Agreement

Waiver

No failure by BSP to exercise and no delay in exercising any right, power or remedy under this Agreement operates as a waiver. Nor does any single or partial exercise or any right, power or remedy preclude any other or further exercise of that or any other right, power or remedy.

Governing Law

This Agreement is governed by and shall be construed in accordance with the laws applicable in your country.

Section H: Declaration

(The declarations made in this section are for all services applied for by the merchant in this application including their subsequent terms and conditions.)

- As the Merchant, I have read and understood the Terms and Conditions of these services. By executing this application, I accept the conditions herein and
 agree to be bound by this agreement in the use of the BSP Merchant facility (ies).
- My obligations in relation to my nominated account and the service provided by the Bank, are subject to the Bank's terms and conditions governing these
 accounts.
- The Bank may request for specific documentation from me, in order to process the application for BSP Merchant facility (ies). By signing this declaration, I warrant that I am authorized by the Company/Organisation to sign and I confirm that the information provided is true and correct.
- Upon signing the Letter of Offer and Terms and Conditions by me, I will be legally bound to this agreement immediately after the Bank installs equipment to commence processing transactions.
- I agree that any information provided in this application will be used by the Bank and any Service Provider to assess this application for a new Merchant Facility or upgrade of BSP Merchant Facility for product research and development purposes.
- If I fail to provide the requested information, or do not agree to any specific terms, the Bank may refuse this application.

Principal Si Full Name: Position: Signature: Date:	ignatory 1	
Position:	gnatory 2	Affix Common Seal
Principal Si Full Name: Position:	ignatory 3	
Signature: Date:		

Page 3 of 4 EFTPoS Application form

BANK USE ONLY	
MERCHANT SEGMENT	
☐ Micro ☐ SME ☐ Corporate ☐ Gove	rnment Education
BRANCH	
Branch:	Country:
I confirm that the application has been completed accurately.	
I confirm that I have verified the identity of the signatories.	
Compiled by:	Checked by:
Name:	Name:
Date:	Date:
Davies Tune (Maye 5000)	1
Device Type (Move 5000)	Authorised by:
☐ 2G/3G ☐ Number of Counters: ☐ 3G/4G ☐ Quantity Required:	J
☐ 3G/4G ☐ Quantity Required:	Name: Date:
	vale.
Additional Functionalities	
MOTO Pre-Authorisation Refund	Tipping Shift
Approval	MOTO & Pre-Authorization Approval
Authorising Manager/Head	General Manager
Approved Declined	☐ Declined
Comments	Comments
	Approved
Name:	Name:
Signature: Date:	Signature: Date:

Page 4 of 4 EFTPoS Application form