

Business Credit Card amendment

For changing details of the Business,
Business Representatives and Cardholders



Useful information

Please write clearly in the white spaces with capital letters or cross the boxes.

Please cross through all sections which are not completed.

All changes made to this form should be made in manuscript either by striking out and/or adding appropriate wording and initialling the changes. We do not accept forms that have been amended using correction fluid.

1 TSB Business Credit Card account details

Name of Business

Business Credit Card account number

2 Amendment to Business details

Please complete the existing details in all cases. Only complete the new details if they are to be changed. Section 7 must be completed in all cases.

Existing details

Name of Business

Address of Business

Building number/
Name

Street

Town/City

Country

Postcode

New details

Name of Business

Address of Business

Building number/
Name

Street

Town/City

Country

Postcode

Business Representative's details

Title Mr Mrs Miss Ms Other (please specify)

Your last name

Your first name(s)

Contact numbers and area dialling codes

Telephone

Fax

Date of birth

Business Limit

Business Representative's details

Title Mr Mrs Miss Ms Other (please specify)

Your last name

Your first name(s)

Contact numbers and area dialling codes

Telephone

Fax

Date of birth

Business Limit

3 Replacement/New Business Representative

There is a maximum of two Business Representatives at any one time.

Please indicate if the new Business Representative is replacing an existing Business Representative or is an additional Business Representative:

Replacing an existing Business Representative

Adding an additional Business Representative

Name of Business Representative being replaced

Replacement/New Business Representative's name and position held

Name

Position held

Business telephone and fax numbers including area dialling codes

Telephone

Fax

Date of birth

Title Mr Mrs Miss Ms Other (please specify) Your last name Your first name(s) Your nationality

Your date of birth

Your home address (where you live)

Building number/
Name Street Town/City Country Postcode

When did you start living at this address?

Month

Year

Your previous home address (if less than one year at current address)

Building number/
Name Street Town/City Country Postcode

What is your current residential status?

Home owner –
with mortgage Home owner –
no mortgage Tenant –
Local authority Tenant –
Private Living with
parents Other (please explain)

Your contact numbers and area dialling codes

Mobile Work Your **personal** TSB sort code and account number (if applicable)

Monthly spend limit (£)

 Please note:

The sum total of all Card Limits cannot exceed the Business Limit.

Your Data

We will use the information you provide to process this application and, if successful, set up your credit card. Some of the information we request is mandatory and if you do not provide it we may not be able to provide you with a credit card.

To get a credit card from TSB, it is necessary to carry out a soft credit check (this is visible only to you and us and does not impact your credit score). To carry out a soft credit check, we share your personal information with our credit check service providers, who will check your details against your credit history.

It is important that your information is accurate and up to date, so please let us know if your details change.

Calls may be recorded for quality and monitoring purposes. For more details about how we manage your personal information, please refer to <https://www.tsb.co.uk/business/legal/my-personal-data>.

I am happy with the above statements described.

Yes

No

 Your signature

Date

Title Mr Mrs Miss Ms Other (please specify)

 Mr
 Mrs
 Miss
 Ms

Your last name

Your first name(s)

Your nationality

Your date of birth

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Your home address (where you live)

Building number/ Name
Street
Town/City
Country
Postcode

When did you start living at this address?

 Month Year
 M M Y Y Y Y

Your previous home address (if less than one year at current address)

Building number/ Name
Street
Town/City
Country
Postcode

What is your current residential status?

Home owner – with mortgage	Home owner – no mortgage	Tenant – Local authority	Tenant – Private	Living with parents
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Other (please explain)

Your contact numbers and area dialling codes

Mobile

Work

Your **personal** TSB sort code and account number (if applicable)

Monthly spend limit (£)

Please note:

The sum total of all Card Limits cannot exceed the Business Limit.

Your Data

We will use the information you provide to process this application and, if successful, set up your credit card. Some of the information we request is mandatory and if you do not provide it we may not be able to provide you with a credit card.

To get a credit card from TSB, it is necessary to carry out a soft credit check (this is visible only to you and us and does not impact your credit score). To carry out a soft credit check, we share your personal information with our credit check service providers, who will check your details against your credit history.

It is important that your information is accurate and up to date, so please let us know if your details change.

Calls may be recorded for quality and monitoring purposes. For more details about how we manage your personal information, please refer to <https://www.tsb.co.uk/business/legal/my-personal-data>.

I am happy with the above statements described.

Yes

No

 Yes
 No
Your signature

 Date

Existing details

Existing Business Credit Cardholder account number

Title Mr Mrs Miss Ms Other (please specify)

Your last name

Your first name(s)

Your nationality

Your date of birth

Your home address (where you live)

Building number/
Name

Street

Town/City

Country

Postcode

What is your current residential status?

Home owner –
with mortgageHome owner –
no mortgageTenant –
Local authorityTenant –
PrivateLiving with
parents

Other (please explain)

Monthly spend limit (£)

New details

Title Mr Mrs Miss Ms Other (please specify)

Your last name

Your first name(s)

Your nationality

Your date of birth

Your home address (where you live)

Building number/
Name

Street

Town/City

Country

Postcode

What is your current residential status?

Home owner –
with mortgageHome owner –
no mortgageTenant –
Local authorityTenant –
PrivateLiving with
parents

Other (please explain)

Monthly spend limit (£)

For full details of how we may use your information please read the Personal and Business Data and TSB Bank plc notice on our website at <https://www.tsb.co.uk/business/legal/my-personal-data> or contact your Relationship Manager.

- 1 Each Cardholder must sign their Card as soon as they receive it.
- 2 The Cardholder must not allow any other person to use the Card, Card Number, Security Code or PIN and must always keep them safe. The Cardholder must always follow any instructions we give in connection with the use and safe-keeping of the Card, Card number and PIN.
- 3 The Cardholder must memorise the PIN and then destroy the slip on which it is printed. The PIN must be kept secret. Do not let anyone else know it or use it.
- 4 The Cardholder should not write the PIN on the Card or on anything which is kept at any time with the Card.
- 5 In the event of any loss, theft, or possible misuse of the Card, the Cardholder must give us or our agents any information or help we ask for, and assist us to recover the Card where relevant. We may pass the information provided to the police or any other relevant third party.
- 6 If a Card is found after the Cardholder or the Business has told us it has been lost or stolen, it must not be used. The Cardholder must ensure that it is destroyed immediately by cutting off the bottom left hand corner through the smartcard chip.
- 7 If either we or the Business asks the Cardholder to return the Card to us or the Business Representative, the Cardholder must do so immediately, with the bottom left hand corner cut off, and with the smartcard chip cut through.
- 8 The Cardholder Account may only be used for the purpose of the Business and may not be used for any other purposes, including personal, family or household purposes. The Cardholder shall be liable to the Business for payment of any Card Transactions made by him/her which are not authorised by the Business. The Business will remain liable to us for all Card Transactions and any charges until payment is made of the full amount outstanding.
- 9 The Cardholder shall be responsible to the Business for checking his/her Cardholder Statement.
- 10 Cardholders must not exceed their Cardholder Limit.
- 11 The Business shall be liable for payment of all reasonable costs and expenses incurred by us:
 - 11.1 as a result of any breach by the Cardholder of these Conditions of Use, as amended from time to time and;
 - 11.2 in recovering any Cards which should have been returned to us.
- 12 All expenses, costs and charges referred to in these Conditions of Use, as amended from time to time, shall be debited to the Business Account.
- 13 The Card, Card number, Security Code or PIN must not be used for any illegal purpose or outside the period shown on the Card or if we have cancelled or suspended it.

For bank use only – to be completed in all cases

Relationship Manager's name

Relationship Manager's contact number with area dialling code

Business Limit agreed (£)

Credit score outcome:

Accepted

Declined

Referred

Final decision:

Accepted

Declined

Credit scoring unique reference number (if applicable)

Please cross this box to indicate customer's verbal agreement to be credit scored for the Business Credit Card

Sanctioned by:

Name

Position held

Sanctioned by (signature)

Date

Send this form with any accompanying application forms to:

Business Card Services

TSB Bank plc

Barnwood 2

Barnett Way

Gloucester

GL4 3RL

TNT 27

Business type

Sole trader

Partnership

Limited Liability Partnership

Limited Company

For Business Card Services use only

Actioned by (initials)

Date actioned

For bank use only – First additional Cardholder

To be completed by member of staff taking identification.

It is **mandatory** to complete all **white** boxes.

Please note that procedures for the identification of customers should be referred to.

New to bank customer – proof of identification and address

Certified and branch stamped copies of identification and proof of address attached

Type of identification

Only complete the greyed out boxes when a photocopier is not available.

Date of issue Reference number

Place of issue Nationality

Type of proof of address

Date of issue Reference number

Place of issue Nationality

Existing customer – proof of identification

Customer identified Customer file updated (if applicable)

Name of accredited account opener Accredited account opener's file number

Location of accredited staff member

I certify that I have seen the original documents. Certified and branch stamped copies of identification and proof of address are attached.

OR

I confirm that no photocopier was available.

Accredited staff members signature

Date

For bank use only – Second additional Cardholder

To be completed by member of staff taking identification.

It is **mandatory** to complete all **white** boxes.

Please note that procedures for the identification of customers should be referred to.

New to bank customer – proof of identification and address

Certified and branch stamped copies of identification and proof of address attached

Type of identification

Only complete the greyed out boxes when a photocopier is not available.

Date of issue Reference number

Place of issue Nationality

Type of proof of address

Date of issue Reference number

Place of issue Nationality

Existing customer – proof of identification

Customer identified Customer file updated (if applicable)

Name of accredited account opener Accredited account opener's file number

Location of accredited staff member

I certify that I have seen the original documents. Certified and branch stamped copies of identification and proof of address are attached.

OR

I confirm that no photocopier was available.

Accredited staff members signature

Date

For completion by Business Card Services only

Business Credit Card number