



ANZ Commercial Cards

Account Maintenance Request Form

This form should be used to maintain account details for Commercial Cards. Commercial Cards include ANZ Corporate Cards, ANZ Purchasing Cards, ANZ Lodged Purchasing Cards and Grandfathered Commercial Cards.

An Authorised Officer is required to sign this form.

1. BUSINESS DETAILS

Name of the Business

Card account number

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2. CHANGE(S) REQUIRED

- Increase or decrease the credit limit on an ANZ Commercial Card (complete sections 3 and 8)
- Change cardholder's name (complete sections 4 and 8)
- Change cardholder's personal address (complete sections 5 and 8)
- Change cardholder's monthly purchase transaction limit and/or monthly cash advance limit (complete sections 6 and 8)
- Close an individual card (complete sections 7 and 8)

3. INCREASE/DECREASE CREDIT LIMIT

New Credit Limit \$ If this is an increase to the credit limit, approval by a Relationship Manager is required.

4. CHANGE CARDHOLDER'S NAME (Not applicable for Lodged Purchasing Cards)

The new card will be sent to the address of the ANZ Commercial Card account.

Current cardholder name New name

5. CHANGE CARDHOLDER'S ADDRESS

Cardholder name

Card number

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New personal address

6. CHANGE CARDHOLDER'S CASH ADVANCE LIMIT AND/OR TRANSACTION LIMIT

(Not Applicable for Lodged Purchasing Cards)

Cardholder name	Card number	New cash advance limit*	New transaction limit				
.....	<table border="1"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> </table>					\$	\$
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* Must be in \$100 multiples. Cash advance limits are per day and transaction limits are per transaction.

ANZ Commercial Cards Account Maintenance Request Form (continued)

7. CARD CLOSURE

Cardholder name	Card number	Card Destroyed
.....	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
.....	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
.....	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
.....	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
.....	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
.....	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

8. AUTHORISATION

Authorised Signatory Name	Authorised Signatory Name
Signature	Signature
Date <input type="text"/>	Date <input type="text"/>

BANK USE ONLY

Customer RM Number	IN No
Manager Name	Signature

Yes, the credit limit increase requested has been approved by the Relationship Manager (if applicable).

Once this form is complete, please email the scanned form to companycards@anz.com or fax to 0800 658 650.