



Commercial Cards Maintenance Request

This form is used if you want to make a change to an existing Commercial Card Billing Account or Card.

Please fax completed form to **1800 459 143**, or send by mail to ANZ Commercial Cards, Locked Bag 10, Collins St West PO, Melbourne Vic 8007. If you need assistance to complete this form please contact the ANZ Commercial Card Service Centre on 1800 032 481.

Once completed please advise me on fax number

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OR/

Once completed please advise me via email address

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1. Nature of Request

Contact Person name

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Contact Phone number

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Please select one of the following options with a 'X' cross.

☐ I would like to make the change described below to the following Card **OR/** ☐ I would like to make the change described below to the following Billing Account.

Card number

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Billing Account Number

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Please describe what you would like changed.

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2. Authority

Client's Authority (must be signed by a Director/Authorised Officer). On behalf of the client, I the undersigned authorise the changes outlined in section 1 to be completed as requested.

Print Name

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Signature

X

Bank Use only

If this request is authorised by an internal ANZ Staff member please complete the following information.

Name:

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Title:

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BSB

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Signature

X
