

# Amendment Form

When filling out this form by hand, please complete in BLOCK CAPITALS and in black ink. When filling out this form on screen, please use the tab key to move between the relevant fields. Ensure you do not use the return or enter keys.

## How we will use your information

Before continuing with this application, please read the information below which explains how we and others will use your personal and financial information during this application process. When we use and share personal and financial information, we do so on the basis that we have a legitimate interest to prevent fraud and money laundering, to manage our risk and to protect our business and to comply with laws that apply to us (including verifying your identity and assessing the suitability of our products).

For full details about how we use the personal and financial information of our clients, please see our full Privacy Notice at [rbsinternational.com/privacynotice](http://rbsinternational.com/privacynotice)

## Who we are

The organisation responsible for processing your information is The Royal Bank of Scotland International Limited (RBS International).

The personal information collected here will only be used to confirm your identity in the event that we have contact with you via telephone.

### 1. Billing Unit details

Business/  
Organisation name

Billing Unit name

Billing Unit number

(please insert the 16 digit account number as shown on your Summary Statement)\*

**\*We are unable to process your application without the Billing Unit number.**

Please cross the options below that apply and complete the relevant section:

- Changes to Authorised Contacts - complete section 2 as required
- Cards Online Administrator registration - complete section 3
- Cardholder/Virtual Account changes - complete section 4 as required
- Merchant Category Group blocking - complete section 5 as required
- Change of Authorised Signatory - complete section 6 as required

### 2. Changes to Authorised Contacts

Please cross the option(s) below that apply and complete the relevant section(s):

- Remove an authorised contact(s) - complete 2.1
- Add a new authorised contact(s) - complete 2.2
- Change the authority level of on existing authorised contact(s)-complete 2.3

**Important Note:** For options 2.2 & 2.3 please note the authority levels as described below when considering the appointment of the Authorised Contact(s):

- **Programme Administrator**  
This person can request information about the card programme.
- **Authority Holder**  
This person can request information about the card programme and request changes to the account including amending limits, spend controls and account details.
- **Account Signatory**  
This person can request information and request changes to the account, including authorising additional cardholders, amending card limits, spend controls and account details.

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## 2.1. Remove an Authorised Contact(s)

Please remove the following individual(s) as an Authorised Contact on the Billing Unit.

	Title	First Name	Middle Name	Last Name
1				
2				
3				
4				

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## 2.2. Add a new Authorised Contact(s)

Please add the following individual(s) as an Authorised Contact on the Billing Unit.

### New Authorised Contact

Please ensure **ALL** sections are completed.

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Date of birth

Preferred daytime contact number

Business mobile number

Business email address

Security password

Signature

Please indicate the authority level that will apply to the above individual by crossing the relevant box below:

Programme Administrator

Authority Holder

Account Signatory

Cross here  if this is the person to whom statements and correspondence should be sent to in future.

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### New Authorised Contact

Please ensure **ALL** sections are completed.

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Date of birth

Preferred daytime contact number

Business mobile number

Business email address

Security password

Signature

Please indicate the authority level that will apply to the above individual by crossing the relevant box below:

Programme Administrator

Authority Holder

Account Signatory

Cross here  if this is the person to whom statements and correspondence should be sent to in future.

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### New Authorised Contact

Please ensure **ALL** sections are completed.

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Date of birth

Preferred daytime contact number

Business mobile number

Business email address

Security password

Signature

Please indicate the authority level that will apply to the above individual by crossing the relevant box below:

Programme Administrator

Authority Holder

Account Signatory

Cross here  if this is the person to whom statements and correspondence should be sent to in future.

**2.3. Change the authority level of an existing Authorised Contact(s)**

**Existing Authorised Contact**

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Please indicate the new authority level that will apply to the individual named above.

**Programme Administrator**

**Authority Holder**

**Account Signatory**

Cross here  if this is the person to whom statements and correspondence should be sent to in future.

**Existing Authorised Contact**

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Please indicate the new authority level that will apply to the individual named above.

**Programme Administrator**

**Authority Holder**

**Account Signatory**

Cross here  if this is the person to whom statements and correspondence should be sent to in future.

**Existing Authorised Contact**

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Please indicate the new authority level that will apply to the individual named above.

**Programme Administrator**

**Authority Holder**

**Account Signatory**

Cross here  if this is the person to whom statements and correspondence should be sent to in future.

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### 3. Cards Online Administrator details

If you have not registered for Cards Online and you would like to receive your statements and management information online, please complete this section.

E-statement notifications will be sent to the person nominated below who will be able to view statements, monitor cardholder activity and close/order replacement cards.

Name (title, first name and surname)

Preferred daytime contact number

E-mail address used for Cards Online e-statement notifications and management information reports

Date of birth

Security password

Note: If you wish to appoint the above person as an Authorised Contact as well, please complete section 2.2.

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### 4. Cardholder/Virtual Account changes

Existing Cardholder/ Virtual Account name:

Card/Virtual Account number:

Please complete as required:

4.1. Change of name  (e.g. upon marriage)

New Cardholder/  
Virtual Account name

(title, first name and surname or departmental name - maximum 19 characters including spaces)

E-mail address

4.2. Cancel a Card/Virtual Account - I/we confirm that any current cards will be destroyed.

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4.3. New monthly card limit required £

If this is a temporary limit change, please indicate the date the limit is to revert back to the current limit

Date

4.4. New single transaction limit required £

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### 5. Merchant Category Group blocking

If you require transaction blocking to apply to selected cards or virtual accounts, please complete section 5.2 and 5.3 below.

5.1. If you require the some transaction blocking to **apply to all cards/virtual accounts** please cross this box  and complete section 5.3 only.

## 5.2. Card/Virtual Account details

By completing this section the cards/virtual accounts detailed below will not be authorised to make transactions in the categories marked in section 5.3.

Cardholder Name/ Virtual Account Name	<input type="text"/>
Card/Virtual Account number:	<input type="text" value="X X X X X X"/>
Cardholder Name/ Virtual Account Name	<input type="text"/>
Card/Virtual Account number:	<input type="text" value="X X X X X X"/>
Cardholder Name/ Virtual Account Name	<input type="text"/>
Card/Virtual Account number:	<input type="text" value="X X X X X X"/>
Cardholder Name/ Virtual Account Name	<input type="text"/>
Card/Virtual Account number:	<input type="text" value="X X X X X X"/>
Cardholder Name/ Virtual Account Name	<input type="text"/>
Card/Virtual Account number:	<input type="text" value="X X X X X X"/>

## 5.3. Merchant Category Group blocking details

Mark all categories where cardholders or Virtual Accounts are **NOT** allowed to spend

1. Building services	<input checked="" type="checkbox"/>	18. Statutory bodies	<input checked="" type="checkbox"/>
2. Building materials	<input checked="" type="checkbox"/>	19. Office stationery, equipment and supplies	<input checked="" type="checkbox"/>
3. Estates and garden services	<input checked="" type="checkbox"/>	20. Computer equipment	<input checked="" type="checkbox"/>
4. Utilities and non-automotive fuel	<input checked="" type="checkbox"/>	21. Print and advertising	<input checked="" type="checkbox"/>
5. Telecommunication services	<input checked="" type="checkbox"/>	22. Books and periodicals	<input checked="" type="checkbox"/>
6. Catering and catering supplies	<input checked="" type="checkbox"/>	23. Mail and courier services	<input checked="" type="checkbox"/>
7. Cleaning services and supplies	<input checked="" type="checkbox"/>	24. Miscellaneous industrial/commercial supplies	<input checked="" type="checkbox"/>
8. Training and educational	<input checked="" type="checkbox"/>	25. Vehicles, servicing and spares	<input checked="" type="checkbox"/>
9. Medical supplies and services	<input checked="" type="checkbox"/>	26. Automotive fuel	<input checked="" type="checkbox"/>
10. Staff-temporary recruitment	<input checked="" type="checkbox"/>	27. Travel	<input checked="" type="checkbox"/>
11. Business clothing and footwear	<input checked="" type="checkbox"/>	28. Auto rental	<input checked="" type="checkbox"/>
12. Mail order/Direct selling	<input checked="" type="checkbox"/>	29. Hotels and accommodation	<input checked="" type="checkbox"/>
13. Personal services	<input checked="" type="checkbox"/>	30. Restaurants and bars	<input checked="" type="checkbox"/>
14. Freight and storage	<input checked="" type="checkbox"/>	31. General retail and wholesale	<input checked="" type="checkbox"/>
15. Professional services	<input checked="" type="checkbox"/>	32. Leisure activities	<input checked="" type="checkbox"/>
16. Financial services	<input checked="" type="checkbox"/>	33. Miscellaneous	<input checked="" type="checkbox"/>
17. Clubs/Associations/Organisations	<input checked="" type="checkbox"/>	34. Cash - cash withdrawal facility from ATM cash over the branch counter/foreign currency outlets etc.	<input checked="" type="checkbox"/>

Please note that there may be some circumstances outside of the Bank's control where transactions with merchants are processed even though you have blocked that merchant category. Please refer to your Terms and/or your Relationship Manager for further information.

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## 6. Change of Authorised Signatory

### 6.1. Remove an Authorised Signatory

Please remove the following individual as Authorised Signatory on the Billing Unit.

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

First name(s)

Middle name(s)

Surname

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### 6.2. Add an Authorised Signatory

This will be the person(s) who can exercise all of those functions of a Programme Administrator, an Authority Holder, and on Account Signatory and, in addition, open and close billing units and appoint or remove Programme Administrators, Authority Holders, Account Signatories and Authorised Signatories.

The person nominated as on Authorised Signatory is authorised, in accordance with your existing signing authorisation.

I/We nominate the Authorised Signatory listed below to be on Account Signatory who can request information and request changes to the account, including authorising additional cardholders, amending card limits, spend controls and account details.

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Date of birth

Security password

Job title

Signature

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### Authority to accept requests for information and instructions.

- For Programme Administrators** the organisation agrees and confirms that RBS International is authorised to provide information on any of the Commercial Card accounts in the organisation's name to a Programme Administrator provided:
  - written, fax, email requests reasonably appear to be signed by a Programme Administrator
  - verbal requests from a Programme Administrator can be identified by agreed security questions.
- For Authority Holders** the organisation agrees and confirms that RBS International is authorised to provide information and accept instructions on any of the Commercial Card accounts in the organisation's name from an Authority Holder provided:
  - written, fax, email requests reasonably appear to be signed by an Authority Holder
  - verbal requests from an Authority Holder can be identified by agreed security questions.
- For Account Signatories** the organisation agrees and confirms that RBS International is authorised to provide information and accept instructions on any of the Commercial Card accounts in the organisation's name from an Account Signatory provided:
  - written, fax, email requests reasonably appear to be signed by an Account Signatory
  - verbal requests from an Account Signatory can be identified by agreed security questions.
- For Authorised Signatories** the organisation agrees and confirms that RBS International is authorised to provide information and accept instructions on any of the Commercial Card accounts in the organisation's name from an Authorised Signatory provided:
  - written, fax, email requests reasonably appear to be signed by an Authorised Signatory.

5. If RBS International cannot identify a Programme Administrator, Authority Holder or Account Signatory by agreed security questions in relation to a verbal request or instruction (as the case may be) then RBS International may request such request or instruction to be made in writing.
6. The organisation will notify RBS International of any changes to an Authorised Signatory, Account Holder, Account Signatory & Programme Administrator. Such notifications must be in writing and reasonably appear to be signed by an Authorised Signatory.
7. The provisions of this Authority are in addition to and not in substitution for the provisions of the organisation's prevailing authorisation and the appropriate product Terms and Conditions.

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## How we use and share your information

### (a) Credit reference and Fraud prevention agencies

We may obtain information about you from credit reference agencies and Group records to check your credit status and identity. Application decisions may be taken based on solely automated checks of information from credit reference agencies and internal RBS records. You have rights in relation to automated decision making. If you want to know more please see our full privacy notice.

The agencies will record our enquiries which may be seen by other companies who make their own credit enquiries. This may affect your ability to obtain credit elsewhere in the near future. We may use credit scoring.

While you have a relationship with us, we will continue to share information with credit reference agencies about how you manage your account including your account balance, the regularity of payments being made, credit limits and any arrears or default in making payments. This information will be made available to other organisations.

This application will be treated as financially independent of any person (except for another party to this application). By completing this application you declare that you believe that the finances of any individual(s) with whom you remain financially connected will not affect our decision and agree that we may check your declaration. We may decline this application if we find that your declaration is inaccurate.

If false or inaccurate information is provided and fraud is identified or suspected, details may be passed to fraud prevention agencies. We may also obtain information about you from fraud prevention agencies.

If we, or a fraud prevention agency, determine that you pose a fraud or money laundering risk, we may refuse to provide services to you.

When credit reference and fraud prevention agencies process your information, they do so on the basis that they have a legitimate interest in preventing fraud and money laundering in order to protect their business and to comply with laws that apply to them.

Further information about agencies, how they use personal information, and financial connections and how they may be ended, can be obtained from the agencies: Experian ([www.experian.co.uk/crain](http://www.experian.co.uk/crain)), Equifax ([www.equifax.co.uk/crain](http://www.equifax.co.uk/crain)) and Callcredit ([www.callcredit.co.uk/crain](http://www.callcredit.co.uk/crain)).

### (b) With other RBS companies

We and other RBS companies worldwide will use the information you supply in this application (and any information we or other RBS companies may already hold about you) in connection with processing your application and assess your suitability for our products.

If your application is declined we will normally keep your information for up to 6 years (or 10 years in Jersey), but we may keep it for longer if required by us or other RBS companies in order to comply with legal and regulatory requirements.

We and other RBS companies may use your information in order to improve the relevance of our products and marketing.

### (c) With other Third Parties

The information provided in this application may be used for compliance with legal and regulatory screening requirements, including confirming your eligibility to hold a UK bank account and sanctions screening.

We may be required to disclose certain information to regulators, tax authorities, government bodies and similar organisations around the world, including the name, address, tax number, account number(s), total gross amount of interest paid or credited to the account and the balance or value of the account(s) of our customers.



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**Authorisation by the business/organisation**

Signed in accordance with the card programme Application Form or as amended by previously completed Amendment Forms.

Authorised signature(s)

Date

Name (title, first name and surname)

Authorised signature(s)

Date

Name (title, first name and surname)

The Royal Bank of Scotland International Limited ("RBS International") is incorporated in Jersey and registered on the Jersey Financial Services Commission ("JFSC") company registry as a private company with limited liability. It is authorised and regulated by the JFSC with registration number 2304. Registered and Head Office: Royal Bank House, 71 Bath Street, St. Helier, Jersey, JE4 8PJ. Tel. 01534 285200. RBS International London Branch is registered in the United Kingdom as a foreign company with registration number FC034191 and branch number BR019279. RBS International London Branch is authorised by the Prudential Regulation Authority and is subject to regulation by the Financial Conduct Authority (reference number 760675) and limited regulation by the Prudential Regulation Authority. Details about the extent of RBS International's regulation by the Prudential Regulation Authority are available on request.

Guernsey business address: P.O. Box 62, Royal Bank Place, 1 Gategny Esplanade, St. Peter Port, Guernsey, GY1 4BQ. Tel. 01481 710051. Regulated by the Guernsey Financial Services Commission and licensed under the Banking Supervision (Bailiwick of Guernsey) Law, 1994, as amended, the Insurance Managers and Insurance Intermediaries (Bailiwick of Guernsey) Law, 2002, and the Protection of Investors (Bailiwick of Guernsey) Law, 1987, as amended.

Isle of Man business address: 2 Athol Street, Douglas, Isle of Man, IM99 1AN. Tel. 01624 646464. Licensed by the Isle of Man Financial Services Authority in respect of Deposit Taking, Investment Business and registered as a General Insurance Intermediary.