

Type of billing

Please choose **one** of the following options.

Collective billing with balance overview

All transactions will be billed monthly. The bill covering all the cards will be sent to the company. In addition, for each card a separate information statement is provided showing the individual transactions for that card.

Card account no.

(If a company master account already exists, please state the account number shown on the monthly bill.)

Please send the information statement showing the individual transactions for this card to
(if different from the address for the company master account):

Company
First name
Last name
Department
Street/no.
Postal code/city

Mailing address for the collective bill for all cards under this card account number
(if different from the address for the company master account):

Company
First name
Last name
Department
Street/no.
Postal code/city

Collective billing showing individual transactions

All transactions will be billed monthly. The bill covering all the cards will be sent to the company. All card transactions are shown in detail on the bill.

Card account no.

(If a company master account already exists, please state the account number shown on the monthly bill.)

Mailing address for collective bill for all cards under this card account number
(if different from the address for the company master account):

Company
First name
Last name
Department
Street/no.
Postal code/city

Individual billing

All transactions for this card will be billed separately on a monthly basis and shown in detail on the bill.

Send individual bill to (if different from the address for the company master account):

Company
First name
Last name
Department
Street/no.
Postal code/city

By request, a copy of the individual bill will be sent to the following address:

Company
First name
Last name
Department
Street/no.
Postal code/city

Payment methods

Bank/post office

Postal code/city

IBAN

For individual billing, it is mandatory that bank information be provided.

We wish to pay by
QR bill for CHF

or

bank transfer for EUR and USD

payable net (free of interest charges) within 20 days of the billing date

We wish to pay by

direct debit for CHF and EUR*

and hereby authorise the bank indicated above to pay all bills submitted to it by
Viseca Card Services SA upon presentation.

* Not available for cards denominated in USD

Important: Please also complete the following page.

Mailing address for card and PIN code

Mailing address for card (if different from the address for the company master account):

Mailing address for PIN code (if different from the card address):

Company
 First name
 Last name
 Department
 Street /no.
 Postal code/city
 Country

Company
 First name
 Last name
 Department
 Street /no.
 Post code/city
 Country

Identification of the beneficial owner

If the assets used to settle the credit card bills for the requested business credit card and/or paid to the issuer of the card in excess of such amount belong **solely** to the company and said company is not a sole proprietorship, a simple partnership or a domiciliary company, **no information** is required below.

If this is not the case, the company declares that these assets (please tick only one answer as appropriate)

- belong to the cardholder.
 are held in trust by the company for the benefit of the person(s) listed below:
 belong to the person(s) listed below:

(Last name(s) / first name(s) / date of birth / nationality / home address)

.....

The company undertakes to notify the bank/credit card issuer of any changes in the above information on its own initiative. It is a criminal offence to deliberately provide false information on this form (Art. 251 of the Swiss Penal Code, forgery of documents; punishable by a prison sentence of up to five years or a fine).

Summary of fees

	Mastercard® Corporate Card Silver in CHF	Mastercard® Corporate Card Gold in CHF	Mastercard® Corporate Card Gold in EUR/USD
Annual fees	Company master account free of charge	Company master account free of charge	Company master account free of charge
- Employee card	Max. CHF 100	Max. CHF 170	Max. EUR/USD 150
- Travel card	CHF 50	CHF 50	EUR/USD 40
- Shopping card	CHF 50	CHF 50	EUR/USD 40
SmartData OnLine licence fee	CHF 500 per year	CHF 500 per year	CHF 500 per year
Replacement card worldwide	CHF 20, in Switzerland usually within two working days, abroad three to six working days	Free of charge, in Switzerland usually within two working days, abroad three to six working days	Free of charge, in Switzerland usually within two working days, abroad three to six working days
Commission for cash withdrawals	3.5% at ATMs worldwide Min. CHF 5 (Switzerland) Min. CHF 10 (abroad)	3.5% at ATMs worldwide Min. CHF 5 (Switzerland) Min. CHF 10 (abroad)	3.5% at ATMs worldwide Min. EUR/USD 3.50 (Switzerland) Min. EUR/USD 7 (abroad)
	4% at bank counters worldwide Min. CHF 10 (Switzerland and abroad)	4% at bank counters worldwide Min. CHF 10 (Switzerland and abroad)	4% at bank counters worldwide Min. EUR/USD 7 (Switzerland and abroad)
Transactions in foreign currency	Amount at exchange rate + 1% processing fee	Amount at exchange rate + 1% processing fee	Amount at exchange rate + 1.5% processing fee
Interest on arrears	14.93%	14.93%	14.93%
Processing fee in the event of late payment	CHF 20 per bill	CHF 20 per bill	EUR/USD 15 per bill
PIN code/PIN replacement	Free of charge	Free of charge	Free of charge
Loss or theft	No charge (CHF 0) for the cardholder if loss/theft is reported immediately and provided that due care was taken	No charge (CHF 0) for the cardholder if loss/theft is reported immediately and provided that due care was taken	No charge (EUR/USD 0) for the cardholder if loss/theft is reported immediately and provided that due care was taken

A summary of all fees is available at viseca.ch

Important: Please also complete the following page.

Insurance cover

Your credit card gives you access to useful insurance at no extra cost. **Viseca Payment Services SA**, as the policyholder, offers card customers of the card issuer, **Viseca Card Services SA**, insurance cover at the same time as the card agreement is concluded. For the purposes of processing the card-related insurance, your data will also be passed on to the card issuer, Viseca Card Services SA, and to the insurers. Any questions and concerns will be handled by the card issuer on behalf of Viseca Payment Services SA. An overview and the General Insurance Conditions (GIC) can be found at viseca.ch/insurance-companies

Excerpt from the GTC and supplemental terms and conditions

Declaration by the undersigned

By signing this document, the undersigned **confirms** the accuracy of the above information and **authorises** Viseca Card Services SA ("Viseca" or "we"):

- as part of the card application process and for the purpose of issuing the card, to verify and process the information provided above and to obtain the necessary information from third parties, e.g. from the Central Office for Credit Information ("ZEK"), from public authorities (e.g. debt enforcement and tax offices, residents' registration offices), the Referring Bank, credit reporting agencies, employers and other information centres that are specified by law or otherwise appropriate;
- to report facts such as card blocking, payment arrears or misuse of the card to the ZEK and, in the cases provided for by law, to the competent authorities; and
- if the card was ordered from a Referring Bank, to obtain all information and documents from the Referring Bank that are necessary to combat money laundering and terrorist financing. The undersigned thereby also authorises the Referring Bank to disclose such information and documents to us and to notify us of any changes to customer data.

Within the scope of these authorisations, the undersigned **releases** us and the Referring Bank from the obligation to preserve banking, business or official secrecy and to comply with data protection rules.

We are entitled to engage service providers and third parties in Switzerland and abroad to perform our services. This includes e.g. card application review, card creation, online services, transaction processing, collection, operational data analysis to improve our fraud prevention and risk models or sending information or offers. The undersigned **authorises** us to furnish these service providers and third parties with the data necessary to perform the tasks incumbent on them.

Insofar as the undersigned has ordered the card from one of our Referring Banks, he/she **authorises** us and agrees that:

- Viseca will share the personal data as well as transaction data with that bank; and
 - the Referring Bank may use the transaction data received for its own purposes in accordance with its own data protection provisions for all of its business areas, particularly for risk management and marketing purposes.
- The undersigned may revoke this consent prospectively at any time by giving written notice.

The undersigned **authorises** and agrees to allow us:

- to create and evaluate customer, consumption and preference profiles in order to offer products and services (including those of third parties) to the undersigned;
- in the context of our collaboration with our programme partners and other partners outside the companies affiliated with Viseca (viseca.ch/corporate), to provide them with certain information for purposes including but not limited to marketing and profiling; and
- to send such information to the undersigned at his/her e-mail address, postal address or by telephone (e.g. SMS) or provide the same via online services.

The undersigned may revoke this consent prospectively at any time by giving written notice.

We have the right to reject this card application or individual applications without indicating any reason. In this case, we and our affiliated companies are entitled to offer other products or services to the undersigned (including to the e-mail address or mobile number indicated above). The undersigned may revoke this authorisation in writing at any time.

By signing the application or the card, using and/or storing the card on a mobile or other device, the undersigned confirms that he/she has read, understood and accepted the **General Terms and Conditions for Payment Cards of Viseca Card Services SA – Commercial (GTC) and Viseca's Privacy Policy**. The undersigned will receive an **excerpt from the GTC as well as a link to the complete GTC together with the card. The GTC and the Privacy Policy as well as the fees currently associated with the use of the card or the contractual relationship may be viewed at any time at viseca.ch or ordered by telephone on +41 (0)58 958 84 01.**

The Contract shall be governed by Swiss law. Unless mandatory statutory provisions apply, **Zurich** shall be the place of performance, jurisdiction and, for signatories residing or registered abroad, the place of debt enforcement.

Signature of applicant and company signatures/stamp

2209

Place/date

Signature of cardholder submitting application

Company stamp

Place/date

Place/date

Legally valid company signature (joint signatures if necessary)

Legally valid company signature (joint signatures if necessary)

First name/last name in block capitals

First name/last name in block capitals

Please send the fully completed and signed form to your bank or to
Viseca Card Services SA, Hagenholzstrasse 56, P.O. Box 7007, 8050 Zurich.
Additional application forms may be obtained at your bank's webpage or from viseca.ch/corporate

Leave blank

Client ID	<input type="text" value="2"/>	<input type="checkbox"/> Preferred partner (if applicable, client ID must be entered)	Date	<input type="text"/>					
Application IID	<input type="text"/>	GSS IID	<input type="text"/>	Bonus code	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	Annual fee Default 01 Alternative 1 st year	<input type="text"/>	Subsequent years	<input type="text"/>
Customer category	Default FBU	DD ID	<input type="text"/>	DIP	<input type="text"/>	DIS	<input type="text"/>		
Name/place, bank/agent	<input type="text"/>			DIC	<input type="text"/>	Ref. no.	<input type="text"/>		
Contact person	<input type="text"/>			Tel.	<input type="text"/>				
<input type="checkbox"/> Identification carried out as per CDB	<input type="checkbox"/> PEP			Stamp/legally valid signatures					