DINERS CLUB NEW ZEALAND, YOU BELONG

DINERS CLUB® GROUP MERCHANT APPLICATION *(For Limited Company)*

FOR OFFICE USE ONLY APA no: Merchant no:

Section 1 – Merchant Details

Company legal name (Applicant):

For office use only
Case no:

Trading name:

First day of trading (DD/MM/YY):

Nature of the business:

GST no:

Physical address:
Street | Suburb | City | Postcode

Phone | Fax | Email

Billing address:
Street | Suburb | City | Postcode

Contact person: | Owner's name:

Section 2 – Merchant Account Details

Payment facilities *(please tick where applicable)*: ☐ Phone/Mail Order ☐ Internet | Required payment advice frequency: ☐ Weekly ☐ Monthly

EFTPOS terminal no: | Number of terminal(s):

Payment options *(please choose one)*
- ☐ Direct Credit-Please provide the bank account no: - - -
  (A deposit slip must be attached for confirmation)
- ☐ Cheque (fee may apply)

FOR OFFICE USE ONLY: Commission rate: % | Chain store no: | Payment time: Days

Section 3 – Agreement

The Applicant applies to Diners Club for a Diners Club Merchant facility. If Diners Club accepts this application, then the Applicant agrees to be bound by the Diners Club Merchant Terms and Conditions. A copy of the Diners Club Merchant Terms and Conditions is available on our website at www.dinersclub.co.nz/merchant or by calling Diners Club on 0800 280 544. The Applicant warrants that the information supplied in this application is true and correct.

The Applicant authorises Diners Club to:
(a) use information about them which they provide in connection with this application for the purposes of assessing this application;
(b) obtain personal information about them from, and disclose all relevant personal information to, credit reference agencies, employers, banks and other third parties, in accordance with its normal procedures for the purposes of assessing this application (credit reference agencies may retain that information and provide it to their customers who use their credit reporting services); and
(c) use, obtain and disclose personal information about them for any other purposes referred to in the Diners Club Merchant Terms and Conditions. Accepted and agreed to by the Applicant by:

Director | Director

Section 4 – Authorisation and Guarantee of Directors

I/We agree to provide Diners Club with such personal information as it considers necessary for the purpose of assessing this application. Diners Club is authorised to obtain personal information about me/us from other parties for the same purpose. It is also authorised to disclose personal information to credit reporting agencies and other parties, on the same basis as set out in (b) under the heading Personal Information above. I/We acknowledge that, in accordance with the Privacy Act 1993, I/We have access to my/our own personal information held by Diners Club (which will be held at its offices at 109 Carlton Gore Road, Newmarket, Auckland) and may request correction of any of that information.

In consideration of Diners Club accepting this application at my/our request, I/we (and if there are more than one of us, jointly and severally) guarantee to Diners Club the payment of any monies now or in the future payable by the Applicant to Diners Club and the due performance by the Applicant of all its obligations under the Diners Club Merchant Terms and Conditions, and indemnify Diners Club against any loss arising from non-payment or non-performance by the Applicant. As between Diners Club and me/us, I/we are principal obligors. No release, delay or other indulgence given by Diners Club to the Applicant or any other thing whereby I/we would have been released had I/we been merely a surety shall release, prejudice or affect my/our liability as a guarantor or as indemnifier.

I/We acknowledge that I/we remain liable as guarantor and indemnifier even though someone who was intended to be a guarantor, or I/we expected to be a guarantor with me/us, does not sign this document as guarantor.

Director 1 - Signature	Full name	Residential address	NZ driver's licence no (Please attach a copy) 5a 5b Date of birth (DD/MM/YY) / /
Director 2 - Signature	Full name	Residential address	NZ driver's licence no (Please attach a copy) 5a 5b Date of birth (DD/MM/YY) / /

IMPORTANT: To prevent delays in processing your application, a copy of the following documents must be submitted:
i. a pre-printed or bank verified deposit slip; *and*
ii. a copy of your driver's licence(s).