

Trading Name of Business _____

Address of Business _____

Merchant Number _____

Att: Merchant System Support
BankSA
**GPO Box 399,
Adelaide SA 5001**

OR

Fax back to:
Merchant System Support
(08) 8424 4851

Date _____ / ____ / ____

Dear Sir/Madam,

I We are writing to request the Mail/Telephone capability be added to my Merchant facility.

I/We are aware of the risks involved with this method of accepting sales and am aware of the limited protection that is offered to us/we as the merchant.

Merchant fees are subject to GST at the prevailing rate (currently 10%).

I/We acknowledge that there may be a \$33.00 fee GST inclusive applicable for each chargeback.

The reason that I/we are requesting this facility is that due to the nature of the business

(Insert nature of business)

The Products that I/we sell

(Insert a list of products sold)

I/we advertise through

(Insert type of advertising used e.g. Yellow Pages, Catalogue, Television, Direct Telemarketing)

The method of accepting sales will be

(Insert how sales will be accepted e.g. Telephone/Fax or Mail)

Estimated percentage of Mail/Telephone transactions

If Internet, website address

The goods are delivered to our customers via

(Insert method of delivery e.g. courier, postal service)

WARNING: Mail/Telephone transactions offer very little protection to the merchant. The onus is on the merchant to prove that the person making the request is the authorised holder of the credit card. All cardholder disputes will be dealt with in accordance with the rules and regulations applying to VISA/MasterCard® as applicable) and could result in a chargeback to the merchant's account. Again, the onus is on the merchant to prove that the cardholder ordering the goods or services is genuine and that they receive the said goods or services.

I trust that the above information is satisfactory. However, if you should require any further information regarding this matter, please feel free to contact us as required.

Yours faithfully

X _____

Signature of Proprietor/Director

Name of Proprietor/Director

X _____

Signature of Proprietor/Director

Name of Proprietor/Director

Our privacy policy is available at banksa.com.au or by calling 13 13 76 and covers how we handle your personal information.

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