

Request to change authorised contacts on your merchant facility.

Please complete this form if you would like to add or remove authorised contact(s) for your Merchant Facility.

An Authorised Contact can call us to request everything that a Staff Member can under a specific Merchant Facility, plus:

- action chargebacks;
- add store numbers;
- ask for additional statements;
- change settlement times;
- report lost, stolen or damaged terminals;
- request a change of phone number;
- request a Merchant Service Fee (MSF) refund;
- request cardholder refunds and set up temporary refunds;
- reset passwords and online access; and
- set up or change a terminal's cash out, surcharging and tipping functions.

Note: If the change is due to a change in ownership, a new Merchant Facility must be established. Please phone our Business Banking Specialists on 1300 130 190 or contact your Relationship Manager.

BankSA Merchant ID

Section 1 – Your merchant details

Trading name

Trading address

State
Postcode

Contact name

Contact phone number

Contact email address

Section 2 – Your change details

Please ADD the following authorised contacts:

1. Contact name

Contact phone number

Contact email address

2. Contact name

Contact phone number

Contact email address

Please REMOVE the following authorised contacts:

1. Contact name

Contact phone number

Contact email address

2. Contact name

Contact phone number

Contact email address

Section 3 – Privacy Statement

All personal information and credit-related information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at banksa.com.au/privacy/privacy-statement or by calling us on 13 13 76. Our Privacy Statement also provides information about how you can access and correct your personal information, and make a complaint. You do not have to provide us with any personal information or credit information but, if you don't, we may not be able to process your application or request.

Section 4 – Your authorisation

Note: This form must be signed by an authorised signatory for the merchant.

Name

Signature

Name

Signature

Date

Please sign this form and email to merchantdocuments@banksa.com.au
OR mail to Merchant Business Solutions, GPO Box 18, Sydney NSW 2001