

# Personal Banking Application Form

---

One Account and Credit Card



This page has been intentionally left blank

# Personal Banking Application Form



This is an application form for a One Account and a credit card.

Please complete your details and return to BOQ Specialist Bank Limited  
GPO Box 2539, Sydney, NSW, 2001 or fax to 1300 131 400

Financial products and services are provided by BOQ Specialist Bank Limited ABN 55 071 292 594 (BOQ Specialist). BOQ Specialist is a wholly owned subsidiary of Bank of Queensland Limited ABN 32 009 656 740 (BOQ). BOQ and BOQ Specialist are both authorised deposit taking institutions in their own right. Neither BOQ nor BOQ Specialist guarantees or otherwise supports the obligations or performance of each other or of each other's products.

Please use **BLOCK LETTERS**

Your BOQ Specialist contact is

## SECTION 1 YOUR DETAILS

If you are applying for an individual account then complete client 1 only.

### Client 1

Mr  Mrs  Dr  Ms  Other

First given name

Other given names

Surname

Date of birth

 /  / 

Mailing address

Suburb State Postcode

  

Residential address (PO BOX is not acceptable)  
If same as mailing address state "As above"

Suburb State Postcode

  

Occupation and or qualification

Date qualified

 /  / 

Mobile number

Additional contact number

Email address

### What is your residential status?

Australian resident  Non-resident

### Do you have a Tax File Number (TFN)

Yes, insert TFN  No, state Exemption Category

If you are applying for a joint account then complete client 1 and client 2.

### Client 2 (only required if opening a joint account)

Mr  Mrs  Dr  Ms  Other

First given name

Other given names

Surname

Date of birth

 /  / 

Mailing address

Suburb State Postcode

  

Residential address (PO BOX is not acceptable)  
If same as mailing address state "As above"

Suburb State Postcode

  

Occupation and or qualification

Date qualified

 /  / 

Mobile number

Additional contact number

Email address

### What is your residential status?

Australian resident  Non-resident

### Do you have a Tax File Number (TFN)

Yes, insert TFN  No, state Exemption Category

Provision of a TFN is not mandatory. If you do not quote your TFN or claim an exemption, tax may be deducted from the interest paid to you at the highest tax rate plus the Medicare Levy. Please see page 13 of the Product Disclosure Statement for more information.

Are you a US Citizen, or a US resident for tax purposes?

Yes  No

If yes, please specify your US Taxpayer Identification Number (TIN)

**Debit card**

Would you like a debit card to be issued in conjunction with your application for a One Account?

Yes  No

Embossing name

If there are to be multiple debit cardholders, please nominate the primary cardholder:

**Security questions (mandatory)**

Your mother's maiden name

Your father's date of birth

Name of your high school

**Please provide us with one of the following identification requirements:**

Driver licence number

Driver licence card number

State of issue

Driver licence expiry date

Medicare card number

Medicare card individual reference number

**Please complete if applicable:**

Sole Trader (trading as name)

Nature of business activity

ABN/ACN

Are you a US Citizen, or a US resident for tax purposes?

Yes  No

If yes, please specify your US Taxpayer Identification Number (TIN)

**Debit card**

Would you like a debit card to be issued in conjunction with your application for a One Account?

Yes  No

Embossing name

If there are to be multiple debit cardholders, please nominate the primary cardholder:

**Security questions (mandatory)**

Your mother's maiden name

Your father's date of birth

Name of your high school

**Please provide us with one of the following identification requirements:**

Driver licence number

Driver licence card number

State of issue

Driver licence expiry date

Medicare card number

Medicare card individual reference number

**Please complete if applicable:**

Sole Trader (trading as name)

Nature of business activity

ABN/ACN

**SECTION 2 ACCOUNT HOLDER/S FINANCIAL STATEMENT OF POSITION (ONLY REQUIRED IF CREDIT IS APPLIED FOR)**

Name

**INCOME**

Monthly Salary

\$

Monthly Other Income

\$

Name

**INCOME**

Monthly Salary

\$

Monthly Other Income

\$

**EXPENSES**

Monthly Rent \$

General living expenses \$

Gross other monthly expenses \$

**ASSETS**

Cash \$

Principal Residence \$

Investment Property \$

Motor Vehicle \$

Superannuation \$

Other \$

**Total Assets** \$

**LIABILITIES**

Overdraft \$

Mortgage Principal Residence \$

Leases \$

Credit limit of all cards held \$

Other \$

**TOTAL LIABILITIES** \$

**NET ASSETS**\$ **EXPENSES**

Monthly Rent \$

General living expenses \$

Gross other monthly expenses \$

**ASSETS**

Cash \$

Principal Residence \$

Investment Property \$

Motor Vehicle \$

Superannuation \$

Other \$

**Total Assets** \$

**LIABILITIES**

Overdraft \$

Mortgage Principal Residence \$

Leases \$

Credit limit of all cards held \$

Other \$

**TOTAL LIABILITIES** \$

**NET ASSETS**\$ **SECTION 3 ONLINE SERVICES**

Your Accounts are enabled for Online Banking. Do you wish to receive your Statements online?

Yes - You will need to activate online banking

No - You will receive paper based statements

**SECTION 4 BOQ SPECIALIST ONE ACCOUNT WITH OVERDRAFT APPLICATION**

Entity type  Individual  Joint

Account name

Credit limit requested: \$  Proposed use of funds

To meet your interest obligations on any interest incurred on the overdraft you must deposit funds to the account each month equal to or exceeding the interest charged on the account in the previous month.

Alternatively you can meet your interest obligations by setting up monthly a direct debit from your nominated bank account. If you prefer this option please tick the box below.

I would like to meet my interest obligations by direct debit from my designated account below.

**SECTION 5 ACCOUNT OPERATING OPTIONS****1. What other bank account would you like to nominate as your Designated Account?**

Please nominate an account which you would like linked to your BOQ Specialist account. If you would like Us to Direct Debit from the Designated Account it must be in the same name as your BOQ Specialist account and this request must be accompanied by a bank statement evidencing the account name, BSB and account number.

Bank

Bank account name

BSB  Account no

## 2. Authority to Operate

Payments from and to the Designated Account (tick one)

I authorise PAYMENTS to and DIRECT DEBITS from this Designated Account from / to my BOQ Specialist Account.

I authorise PAYMENTS ONLY to this Designated Account from my BOQ Specialist Account.

I authorise DIRECT DEBITS ONLY from this Designated Account to my BOQ Specialist Account.

**This request must be accompanied by a bank statement evidencing the account name, BSB number and account number.**

If you would like to set up additional Designated Accounts, please do so by utilising additional copies of this page or contact Us on 1300 160 160.

### **Request and authority to debit the account (designated account) named in section 5 of this account application form to pay: BOQ Specialist Bank Limited ABN 55 071 292 594 (userID 359291)**

I/We request and authorise BOQ Specialist Bank Limited ABN 55 071 292 594 (userID 359291) to arrange, through its own financial institution, a debit to my/our designated account any amount BOQ Specialist Bank Limited ABN 55 071 292 594 has deemed payable by me/us.

This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from my/our designated account held at the financial institution I/we have nominated above and will be subject to the terms and conditions of the Direct Debit Request Service Agreement (as set out on page 37 of the Product Disclosure Statement).

By signing and/or providing you with a valid instruction in respect of my/our Direct Debit Request, I/we have understood and agreed to the terms and conditions governing the debit arrangements between me/us and BOQ Specialist Bank Limited ABN 55 071 292 594 as set out in this Request and in my/our Direct Debit Request Service Agreement.

## 3. Operating Authority (Excluding Designated Account Transfers)

If this section is left blank or incomplete, the account will be deemed to be operated by any one signatory.

Any one signatory  Any two of the signatories  All the signatories

Other instructions

*Note: For Online Banking where more than one signatory is required to operate the account, you will need two signatories to authorise a transaction. Where you have specified more than two signatories on an account, any two signatories can authorise payments in online banking.*

## 4. Electronic Communications

You consent to receiving by electronic communication any pre-contractual information, notices and other documents relating to the One Account that We are required to give you. We will rely on this consent to communicate with you by electronic mail ("e-mail") to the e-mail address that you have notified to Us. By giving this consent, you acknowledge that We are no longer required to send you pre-contractual information, notices and other documents relating to the One Account in paper form. You must ensure that you check your email regularly for pre-contractual information, notices and other documents from Us and notify Us of any changes to your email address. You should also ensure that emails from Us to your email address are not blocked. You may withdraw this consent at any time and change to receiving the paper document to your nominated mail address, by notifying Us through email.

## SECTION 6 PRIVACY DECLARATION

I acknowledge that any personal information BOQ Specialist collects about me (Personal Information) (whether directly from me or through a credit reporting body or other third party) may be collected, used and disclosed by BOQ Specialist:

- to enable it to assess the application for the credit facility, or to be a guarantor in relation to the credit facility;
- to review the credit facility on a periodic basis or in connection with changes (e.g. credit limit), as though assessing a new application at that time;
- to verify my identity and complete anti-money laundering and counter terrorism checks as required by law;
- if my application is successful, for the subsequent administration of the account and credit facility (including portfolio analysis, security, risk management, collecting overdue repayments and complying with BOQ Specialist obligations at law);
- to enable it to undertake planning, product development, data mining or research;
- to produce its own assessments and ratings in respect of my credit worthiness;
- in connection with any potential or actual acquisition of an interest in BOQ Specialist; and
- for the investigation and prevention of crime, fraud and illegal conduct.

I acknowledge that not providing the Personal Information may result in my application being rejected.

I understand that BOQ Specialist may store personal information it collects about me in its information systems and physical records.

If I provide personal information about any other person, I will first ensure each such person has seen this Privacy Declaration and the Customer Information & Privacy section of this PDS and has understood their contents, and has separately agreed to their personal information being collected, used and disclosed by BOQ Specialist in the same way and in the same manner - to the extent permitted by law - that my Personal Information may be collected, used and disclosed in accordance with this Privacy Declaration and the Customer Information & Privacy section of this PDS.

I understand and agree that BOQ Specialist may disclose my Personal Information, to the extent permitted by law, to:

- other financial institutions and credit providers for purposes including (i) assessing my application(s) for credit; (ii) notifying other credit providers of defaults; (iii) exchanging information about my credit status where I am in default with BOQ Specialist or another credit provider; (iv) assessing my credit worthiness at any time during or after the life of my credit arrangement; and (v) any other purpose authorised by law;
- BOQ Specialist's subsidiaries, or related bodies corporate;

- its agents, credit managers and related service providers who assist BOQ Specialist in the management and administration of my/our application and the credit facility;
- its other agents and service providers (including without limitation organisations providing debt collection, mailing house, legal, accounting, business and financial consulting, loan management, archival, auditing, banking, marketing, advertising, delivery, recruitment, customer contact, information technology, research, utility, valuation, insurance (including lenders' mortgage insurance), data processing, data analysis, investigation or security services);
- anyone who introduces me to BOQ Specialist (such as a mortgage broker);
- partner organisations, including organisations providing benefits to BOQ Specialist clients and suppliers of products or services requested by me but not provided by BOQ Specialist;
- organisations providing processing and other support functions to BOQ Specialist;
- other persons (if any) authorised to operate the credit facility;
- other entities to whom BOQ Specialist is by law required to provide information about me (for example law enforcement authorities and Government authorities);
- government registries (such as the Land Titles Office of any State and the Personal Property Securities Register);
- relevant dispute resolution schemes;
- any guarantor or potential guarantor for the credit facility;
- my executor, administrator, trustee, guardian or attorney;
- my agents, such as financial or legal advisers; and
- other entities that are authorised by me.

**Authority to exchange information with agents.** I authorise BOQ Specialist to exchange information concerning my financial affairs with any person acting on my behalf, including my agent, accountant, financial advisor, solicitor or broker, provided that the information relates to my personal credit worthiness (including a credit report). Except as otherwise provided in this application form or permitted by law, BOQ Specialist will only give the information to a person authorised in writing by me to seek access to that information.

Information regarding our Privacy Policy and use of your personal information is detailed on page 14 of the PDS.

Please tick this box if you do not wish to receive marketing offers about Our products and services.

## SECTION 7 ONE ACCOUNT HOLDER(S) DECLARATION AND ACCEPTANCE

### General Declaration

By signing this application, the Account Holder(s) requests BOQ Specialist to make an assessment of my/our credit worthiness to provide a credit facility on terms and conditions. I/we declare that all information provided to BOQ Specialist is true and correct and not misleading in any respect.

### Warranty and Acknowledgement

By signing below:

- you warrant that the information supplied by you in this Account Application Form is true and correct in every respect and agree that the Terms and Conditions for Transaction and Savings Accounts, your Account Application Form, the accompanying Transaction and Savings Accounts PDS and FSG, the Direct Debit Request – Service Agreement if applicable and, where applicable, Special Terms and Conditions and Debit Card Conditions of Use (if applicable), shall form the basis of your deposit;
- you confirm that you have received, read and understood the Terms and Conditions for the Transaction and Savings Accounts (with Overdraft) PDS and FSG, the Direct Debit Request – Service Agreement if applicable, the 'Account opening documentation requirements' and, where applicable, Special Terms and Conditions and Debit Card Conditions of Use (if applicable), and agree to be bound thereby as well as any further or other conditions we may formulate in respect of your account from time to time and notify you in writing;
- you confirm that if BOQ Specialist approves your Account Application Form and Credit Limit, BOQ Specialist will send you a One Account Schedule or equivalent document offering to enter into a contract with you for an Overdraft Account and that you will be bound by the Terms and Conditions for the Transaction and Savings Accounts (with Overdraft) PDS and FSG and the Direct Debit Request – Service Agreement (if applicable) and any Special Terms and Conditions (if applicable) and Debit Card Conditions of Use (if applicable) with respect to the Overdraft Account where you accept the offer as set out in the One Account Schedule. The One Account Schedule may require you to accept the terms of the Overdraft Account by signing and returning a specified document or may allow you to accept the terms in some other way;
- you warrant that in opening your account you have complied with all relevant legislation;
- you confirm that you have not relied on any warranty or representation made by BOQ Specialist in relation to this product and that you have obtained your own advice in relation to this product;
- you agree to the Privacy Declaration in Section 6 of this application form.
- you acknowledge that where a debit card is issued in conjunction with your One Account, your activation of a debit card, and/or first use of the debit card constitutes your acceptance of the Debit Cards Conditions of Use.

#### Acceptance by Client 1

Name

Signature

Date

 /  / 

#### Acceptance by Client 2

Name

Signature

Date

 /  /

## SECTION 8 BUSINESS PURPOSE DECLARATION

I/We declare that the credit to be provided to me/us by the credit provider is to be applied wholly or predominantly for:

- business purposes; or
- investment purposes other than investment in residential property.

### IMPORTANT

You should only sign this declaration if this loan is wholly or predominantly for:

- business purposes; or
- investment purposes other than investment in residential property.

By signing this declaration you may lose your protection under the National Credit Code.

#### Client 1

Name

Signature

Date

 /  / 

#### Client 2

Name

Signature

Date

 /  / 

## SECTION 9 CREDIT CARD APPLICATION

You may be eligible for one of our credit cards as part of your One Account application.

This section is to be completed by the applicant wanting to apply for a credit card account in conjunction with their One Account application and where that applicant in that application has consented to the use of their personal information for that purpose.

I wish to apply for a credit card account:

Yes (Please complete the following application)  No

Please select your credit card:

I would like to apply for a Platinum Visa Credit Card  
I earn in excess of \$60,000

I would like to apply for a Signature Visa Credit Card  
I earn in excess of \$120,000

If you have selected a Signature card but don't qualify for a Signature card we will process this as an application for a Platinum card. Only one One Account applicant can apply. Speak to your financial specialist to ensure that you are eligible.

For information about these credit cards please visit [www.boqspecialist.com.au/card](http://www.boqspecialist.com.au/card)

If you request an additional card holder it will be the same type of card as yours.

Requested credit limit:

\$  Minimum credit limits apply.

### 2. MEMBERSHIP DETAILS

#### Qantas Frequent Flyer Membership Number

You are eligible to earn Qantas Points, however, you must become a Qantas Frequent Flyers member. For your complimentary membership please visit [qantas.com/joinffboqspecialist\\*\\*](http://qantas.com/joinffboqspecialist**)

QFF Membership No

#### Medical and Dental associations

Before completing, please read the section 'Authority to disclose information under the 'Acknowledgement and consent' sections below.

AMA

ADA

State of issue

Membership number

### 3. ALERTS AND NOTIFICATIONS

A primary cardholder can receive notifications via SMS and/or email.

How would you like to receive alerts?  SMS  Email  None

Notify me for transactions over \$  (min value \$100)

Notify me when I am within \$  of my credit limit

Notify me when I am over my limit

### 1. PERSONAL DETAILS

Title

First name

Middle name

Surname

Name to appear on card

Default is title, first name, last name.

Limited to 20 characters (including spaces)



#### 4. DIRECT DEBIT REQUEST

I will be depositing my salary into my One Account

Yes  No

If answered 'Yes', would you like your card payments to be made from your One Account.

Yes  No

Your account will be debited on the 25th of every month, or first business day after, if the 25th is not a business day

PLEASE indicate your payment method:

FULL BALANCE of amount owing, collected monthly

By completing this Direct Debit Request you acknowledge that you have read and understood the terms and conditions under which debit arrangements are made between you and BOQ Specialist in this Direct Debit Request and the Direct Debit Request Service Agreement contained in this application; and agree to be bound by them.

#### 5. LIMIT INCREASES

By ticking this box, I:

- consent to receiving any written credit limit increase invitations that BOQ Specialist may, from time to time, make to me;
- acknowledge that I have absolute discretion whether or not to apply for any credit limit increase pursuant to the invitation;
- acknowledge that BOQ Specialist has a discretion whether to grant any increase I apply for; and
- acknowledge that I may withdraw this consent at any time

#### 6. DECLARATION/SIGNATURE

I have read and agree to the Acknowledgment and Consent contained in this application. I acknowledge that you will rely on this information and that obtained from a credit reporting agency to make a decision as to whether to offer me a credit card. I am not an undischarged bankrupt or have not been bankrupt in the last five (5) years. I confirm my current financial position will enable me to meet the minimum repayments on the requested credit limit.

##### Privacy - Primary cardholder

Please tick this box if you do not wish to receive marketing offers about Our products and services.

Applicant's signature

Sign Here

Date

/  /

#### 7. ADDITIONAL CARDHOLDER (OPTIONAL)

Additional cardholders must be 16 years or over. All transactions made using the additional card will be the responsibility of the primary cardholder.

Title

First name

Middle name

Surname

Date of birth

/  /

Mother's maiden name

Relationship to primary cardholder

Contact telephone number (  )

Mobile telephone number

Email address

Residential address (only if different to primary cardholder)

Suburb

State

Postcode

Name to appear on card

Default is title, first name, last name. Limited to 20 characters (including spaces)

Do you wish to set a monthly spend limit on the additional card?

Yes  No

Spend limit \$

##### Type of authority (Optional)

Please refer to the Access Authorities for Additional Cardholders section under the Acknowledgement and Consent section of this form.

Access to online banking\*\*\*

Enquiry authority

Authority to maintain account

You will need to contact the Client Service Centre to register for online banking once you receive your card.

An additional cardholder can receive notifications via SMS and/or email.

How would you like to receive alerts?  SMS  Email  None

Notify me for transactions over \$  (min value \$100)

#### 8. DECLARATION/SIGNATURE FOR ADDITIONAL CARDHOLDERS\*\*\*

We have read and agree to the Acknowledgment and Consent contained in this application. We acknowledge that you will rely on this information to offer an additional card.

##### Privacy - Additional cardholder

Please tick this box if you do not wish to receive marketing offers about Our products and services.

Additional cardholder's signature

Sign Here

Date

/  /

Applicant's signature

Sign Here

Date

/  /

\* Please note, your approved credit limit will be determined by your desired credit limit, BOQ Specialist's credit policy and product mandates.

\*\* Points and membership are subject to Qantas Frequent Flyer program terms and conditions.

\*\*\* This additional cardholder will have the equivalent Online Banking access rights as the primary cardholder.

#### BOQ SPECIALIST'S USE ONLY

Source code

--	--	--	--	--	--	--	--	--	--

Promo code

--	--	--	--	--	--	--	--	--	--

### 9. ACKNOWLEDGEMENT AND CONSENT

BOQ Specialist Bank (Australia) Limited ABN 55 071 292 594, ACL 234975 (BOQ Specialist) is the credit provider and is an Authorised Deposit-taking Institution and a member of Visa. This form is issued by BOQ Specialist.

This Acknowledgement and Consent applies to the primary cardholder and - where noted - any additional cardholder.

#### 1. Application

By signing and submitting this application, I apply to BOQ Specialist for a credit facility to enable me (and each additional cardholder named in this application or later nominated by me if any) to purchase goods and services on credit and obtain cash advances (Facility).

I acknowledge that if BOQ Specialist accepts my application (which it may do so in its sole discretion), I will be sent an offer to enter into a contract and other disclosure information (collectively referred to as the Contract) by BOQ Specialist. That Contract will govern the Facility and I agree to be bound by the terms of that Contract.

I confirm that I am an Australian resident and am 18 years of age or over and that I am financially solvent and able to pay all my debts as they fall due.

If my financial details change, including annual income and regular expenses, I acknowledge that I must give BOQ Specialist prompt notice of such changes. I acknowledge that BOQ Specialist relies on this information being kept up to date and complete.

I acknowledge and agree that the information provided in this application is true and correct and I have disclosed to BOQ Specialist all matters that are material to enable BOQ Specialist to assess my creditworthiness.

#### 2. Protection of my privacy and personal information

By completing this application I acknowledge that I am or will be providing personal information to BOQ Specialist about myself. BOQ Specialist may also collect personal information about me in the course of my dealings with BOQ Specialist.

As well as collecting personal information from me directly, BOQ Specialist may collect personal information from the primary cardholder (if not me), public sources, information brokers, other credit providers and third parties such as those described in this Acknowledgment and Consent (e.g. under 'Authority to disclose information'). Some of the personal information BOQ Specialist collects about me is collected as required or authorised by laws such as the *National Consumer Credit Protection Act 2009* (Cth) and the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (Cth).

I acknowledge that this personal information, and any other personal information BOQ Specialist collects about me (Personal Information) (whether directly from me or through a credit reporting body or other third party) may be collected, used and disclosed by BOQ Specialist:

- to enable it to assess my application for the Facility;
- to review my Facility on a periodic basis or in connection with changes (e.g. credit limit), as though assessing a new application at that time;
- to verify my identity and complete anti-money laundering and counter terrorism checks as required by law;
- if my application is successful, for the subsequent administration of the Facility (including portfolio analysis, security, risk management, collecting overdue repayments and complying with BOQ Specialist's obligations at law);
- to enable it to undertake planning, product development, data mining or research;
- to produce its own assessments and ratings in respect of my credit worthiness;
- in connection with any potential or actual acquisition of an interest in BOQ Specialist; and
- for the investigation and prevention of crime, fraud and illegal conduct.

I acknowledge that not providing the Personal Information may result in my application being rejected.

I understand that BOQ Specialist may store personal information it collects about me in its information systems and physical records.

Subject to the provisions of the Privacy Act 1988 (Cth) (Privacy Act), I acknowledge that I may access and correct my Personal Information collected and held by BOQ Specialist by making a request to BOQ Specialist. BOQ Specialist suggests that I provide as much detail as I can about the particular information I seek, in order to help BOQ Specialist locate it. BOQ Specialist will provide reasons if it denies any request for access to or correction of personal information. Where BOQ Specialist decides not to make a requested correction to my personal information and I disagree, I may ask BOQ Specialist to record a note of my requested correction with the information.

### 3. Acknowledgement and authority that credit information may be given to a credit reporting body

I acknowledge and agree that BOQ Specialist may give information about me to a credit reporting body for the following purposes:

- to obtain a consumer credit report about me; and/or
- to allow the credit reporting body to create or maintain a credit information file containing information about me.

This information may include, when permitted by law:

- permitted identity particulars - my name, gender, address (and my previous two addresses), date of birth, name of employer and driver's licence number;
- application for credit - the fact that I have applied for credit and the amount and type of credit and the credit limit;
- if my application is successful:
  - the fact that BOQ Specialist is a current credit provider to me;
  - start and end dates of my credit, and certain terms and conditions relating to my credit;
  - information about certain repayments which are overdue by more than 60 days;
  - information about new payment arrangements where my repayments are overdue;
  - other repayment history information;
  - advice that my repayments are no longer overdue in respect of any default that has been listed;
  - information that, in the opinion of BOQ Specialist, I have committed a serious credit infringement (that is, acted fraudulently or shown an intention not to comply with my credit obligations as are set out in the Contract);
  - information about court judgments against me;
  - publicly available information relevant to my credit worthiness;
  - information about new payment arrangements where my repayments are overdue; and
  - certain insolvency information from the National Personal Insolvency Index.

This information may be given before, during or after the provision of credit to me.

I also hereby consent to BOQ Specialist disclosing my name, residential address and date of birth to a credit reporting body and BOQ Specialist can ask the credit reporting body to provide an assessment of whether the personal information so provided matches (in whole or in part) personal information contained in a credit information file in the possession or control of the credit reporting body to assist in verifying my identity for the purposes of Anti-money Laundering and Counter-Terrorism Act 2006. The credit reporting body may prepare and provide BOQ Specialist with such an assessment and may use my personal information including names, residential address and dates of birth contained in their credit information files for the purpose of preparing such an assessment.

### 4. Authority to disclose information

In addition to disclosing my Personal Information to a credit reporting body, I understand and agree that BOQ Specialist may disclose my Personal Information, to the extent permitted by law, to:

- other financial institutions and credit providers for purposes including (i) assessing my application(s) for credit; (ii) notifying other credit providers of defaults; (iii) exchanging information about my credit status where I am in default with BOQ Specialist or another credit provider; (iv) assessing my credit worthiness at any time during or after the life of my credit arrangement; and (v) any other purpose authorised by law;
- BOQ Specialist's subsidiaries and related bodies corporate
- its agents, credit managers and related service providers who assist BOQ Specialist in the management and administration of my application and Facility;
- its other agents and service providers (including without limitation organisations providing debt collection, mailing house, legal, accounting, business and financial consulting, loan management, archival, auditing, banking, marketing, advertising, delivery, recruitment, customer contact, information technology, research, utility, valuation, insurance, data processing, data analysis, investigation or security services);
- partner organisations, including organisations providing benefits to BOQ Specialist clients (e.g. Qantas, Priority Pass etc.) and suppliers of products or services requested by me but not provided by BOQ Specialist;
- organisations providing processing and other support functions to BOQ Specialist;
- additional cardholders or other persons (if any) authorised by me to operate my Facility;
- other entities to whom BOQ Specialist is by law required to provide information about me to (for example law enforcement authorities and Government authorities);
- relevant dispute resolution schemes;
- my executor, administrator, trustee, guardian or attorney;
- my agents, such as financial or legal advisers; and
- other entities that are authorised by me.

Some of the third parties to whom BOQ Specialist may disclose my personal information may be located in South Africa, United Kingdom, New Zealand, The Philippines, India, Singapore, The United States of America and other countries. BOQ Specialist is required to comply with certain provisions of the Privacy Act to protect my privacy in relation to these disclosures. While these third parties outside Australia will often be subject to privacy and confidentiality obligations, I acknowledge that: (a) they may not always comply with those obligations or those obligations may differ from Australian privacy laws; (b) BOQ Specialist will not be accountable for the third party under the Privacy Act; (c) I may not be able to seek redress under the Privacy Act; and (d) the third party may be subject to foreign laws which might compel further disclosures of personal information (e.g. to government authorities).

In addition, I further acknowledge and authorise Qantas Airways Limited (ABN 16 009 661 901) ("Qantas") and BOQ Specialist to exchange my personal information (including my name, address, email address, date of birth and Qantas Frequent Flyer membership number). I acknowledge that the exchange of this information is necessary and will be limited to the extent required to ensure that I can earn Qantas Points under and subject to these terms and conditions and the Qantas Frequent Flyer program terms and conditions (available at [qantas.com/frequentflyer](http://qantas.com/frequentflyer)) and that I can be provided with the benefits of the Qantas Frequent Flyer program including information on it and available rewards.

#### 5. Authority for BOQ Specialist to obtain certain credit information

To enable BOQ Specialist to assess my application for consumer credit or commercial credit, or to review any existing credit given by BOQ Specialist, I authorise BOQ Specialist to obtain:

- a credit report from a credit reporting body containing Personal Information or commercial information about me in relation to consumer credit provided to me; and
- information about my commercial activities or commercial credit worthiness from a business which provides information about the commercial credit worthiness of a person.

#### 6. Authority for BOQ Specialist to confirm application details

I authorise BOQ Specialist to contact my current or past employers, my accountant, my bank in respect of credit transfers, landlord, real estate agent, relative or friend nominated in this application form, financial advisor, broker and/or solicitors to verify the details contained in this application form. I agree to only provide personal information about other individuals to BOQ Specialist on this application form where I have informed those individuals that I am doing so.

#### 7. Authority to exchange information with agents

I authorise BOQ Specialist to exchange information concerning my financial affairs with any person acting on my behalf, including my agent, accountant, financial advisor, solicitor or broker, provided that the information relates to my personal credit worthiness (including a credit report). Except as otherwise provided in this application form or permitted by law, BOQ Specialist will only give the information to a person authorised in writing by me to seek access to that information.

#### 8. Marketing - Primary and additional cardholder

Unless I have ticked the direct marketing 'opt-out' box on this application form, I consent to BOQ Specialist using and sharing information about me with its related corporations to contact me on an ongoing basis by any means including telephone, email and other electronic message, to provide me information about BOQ Specialist's other products and services which BOQ Specialist thinks might be of interest to me. I acknowledge that I have the option to call BOQ Specialist at any time if I no longer want to receive such information.

#### 9. Notifications - Primary and additional cardholder

I also acknowledge that BOQ Specialist may send me Short Messaging Service (SMSs) for any purpose related to my application or card, if approved. I acknowledge that BOQ Specialist will send these SMSs to any mobile phone number it has on record for me and that I need to contact BOQ Specialist if I want to nominate a different mobile number to be used.

#### 10. Recording

I acknowledge that BOQ Specialist may keep records of communications including emails and telephone calls for purposes including training and verification.

#### 11. Further information

If I have any questions, concerns or feedback about privacy, I may contact BOQ Specialist's Privacy Officer as follows:

- address: GPO Box 2539, Sydney NSW 2001
- email: [privacy@boqspecialist.com.au](mailto:privacy@boqspecialist.com.au); or
- telephone: 1300 160 160.

Where I raise any concerns that BOQ Specialist has interfered with my privacy, BOQ Specialist will respond to let me know who will be handling my matter and when I can expect a further response.

I understand that I can access BOQ Specialist's Privacy Policy via [www.boqspecialist.com.au](http://www.boqspecialist.com.au) or on request. The Privacy Policy contains further details about how BOQ Specialist handles personal information and credit reporting information, and matters such as website privacy, credit reporting bodies used and my access, correction and complaint rights in relation to BOQ Specialist and those credit reporting bodies.

## ACCESS AUTHORITIES FOR ADDITIONAL CARDHOLDERS

#### 12. Online banking

By selecting this option, I hereby give the additional cardholder authority to register for online banking in relation to my Facility/card account. I acknowledge that this authority will enable the additional cardholder to view my transaction history and statements. The additional cardholder will be subject to BOQ Specialist's Online Banking Terms and Conditions as amended from time to time.

#### 13. Enquiry authority

By selecting this option, I hereby give the additional cardholder the authority to request information relating to my Facility/card account and acknowledge that BOQ Specialist will act on a request made by the additional cardholder to disclose such information.

I acknowledge that an additional cardholder will have access to and be provided information relating to my Facility/card account and its operation, including my account balance, the amount of credit available, the minimum payment due, transactions history and statements.

#### 14. Authority to maintain account

By selecting this type of authority I authorise the additional cardholder to have access to the information about my Facility/card account and for that additional cardholder to maintain my Facility/card account by granting him/her authority to notify BOQ Specialist of changes to the address and/or contact details and to request the issuance of replacement credit cards.

The additional cardholder authority will take effect on the date that BOQ Specialist amends its records to note the appointment and continues until I inform BOQ Specialist in writing to cancel or change this authority.

In the event of the death of an account holder, the authority given under this form will automatically terminate.

#### 15. Privacy acknowledgment - Additional cardholder

By completing this Form, I acknowledge that I, as the additional cardholder, will be providing personal information to BOQ Specialist about myself. I acknowledge that this personal information and any other personal information BOQ Specialist collects about me (either directly or indirectly) will be used by BOQ Specialist to verify my identity and complete anti-money laundering and counter terrorism checks as required by law. For more information or to view a copy of BOQ Specialist's Privacy Policy please go to [www.boqspecialist.com.au](http://www.boqspecialist.com.au)

#### 16. Acknowledgement and consent

I separately agree that if I nominate an additional cardholder, or provide personal information about any other person, I will first ensure each such person has seen this Acknowledgement and Consent and has understood its contents, and has separately agreed to their personal information being collected, used and disclosed by BOQ Specialist in the same way and in the same manner - to the extent permitted by law - that my Personal Information may be collected, used and disclosed in accordance with this Acknowledgement and Consent.

By nominating a person to be an additional cardholder I consent to that person using my card account.

I acknowledge that I will be liable for all debts incurred by an additional cardholder.

#### 17. Acknowledgement - Financial Advice

I acknowledge that by completing the details under the heading "Self Employed or Retired" in Section 1 "Your Details" of the application that I authorise BOQ Specialist to contact my accountant/ financial advisor on my behalf and obtain from my accountant/financial advisor copies of my financial statements in respect of my business, taxation returns or evidence of income for the last two (2) financial years. I acknowledge that BOQ Specialist may request that I produce evidence of my assets, liabilities and income for verification purposes.

## Account Opening Documentation Requirements

Everyone who opens a new account and all signatories to the account are required by law to be identified. The below table outlines the identification documents and supporting documentation we require to open an account, which are to be provided together with your completed Account Application Form.

Please note: If your application is able to be electronically verified we can receive all signed documents by email to [client.service@boqspecialist.com.au](mailto:client.service@boqspecialist.com.au) or fax (02) 9293 2160.

---

<b>INDIVIDUAL/SOLE TRADER</b>	<ul style="list-style-type: none"><li>• Current Driver Licence or Passport; OR</li><li>• Birth or Citizenship certificate; AND</li><li>• Rates notice issued by a local government body OR utility bill less than 3 months old</li><li>• OR Income Tax assessment notice less than 12 months old.</li></ul>
<b>JOINT ACCOUNT</b> <i>[Listed and Unlisted]</i>	<ul style="list-style-type: none"><li>• Each applicant to be identified as per the above 'Individual' identification requirements.</li></ul>
<b>AUSTRALIAN COMPANY</b> <i>[Listed and Unlisted]</i>	<ul style="list-style-type: none"><li>• Name and residential address of all directors (must not be a PO Box).</li><li>• Name and address of those individual shareholders who directly or indirectly hold 25% or more of Company (must not be a PO Box).</li><li>• Each signatory to be identified as per the above 'Individual' identification requirements.</li><li>• Please note in some circumstances We require Individual shareholders holding 25% or more (through one or more shareholdings) to be identified according to the above 'Individual' requirements. We will contact you if this is the case.</li></ul>
<b>PARTNERSHIPS</b>	<ul style="list-style-type: none"><li>• Certified copy or certified extract of partnership agreement or extract of minutes of a partnership meeting (extract must contain full name of the partnership, partners, business name and country of establishment).</li><li>• Full name and residential address of each partner (unless the partnership is a member of a professional association, whereby evidence from the membership directory is required).</li><li>• One partner is to be identified as per above 'Individual' requirements.</li><li>• Each signatory to be identified as per above 'Individual' requirements.</li></ul>
<b>TRUSTS AND SUPERANNUATION FUNDS</b> <i>[Regulated and Unregulated]</i>	<p>For Unregulated Trusts:</p> <ul style="list-style-type: none"><li>• Certified copy or certified extract of the current Trust Deed (extract must contain full name of the trust, type of trust, names and class of beneficiaries, trustees, the signature page and country of formation); OR</li><li>• A letter from a qualified solicitor or accountant confirming the name of the trust</li><li>• OR notice issued by the ATO within the last 12 months (e.g. a Notice of Assessment that contains the full name of the trust); AND a Beneficiary Declaration to be provided by the Trustee/s.<sup>1</sup></li></ul> <p>For Regulated and Unregulated Trusts:</p> <ul style="list-style-type: none"><li>• If the Trustee is an individual, the Trustee is to be identified as per the above 'Individual' identification requirements.</li><li>• If the Trustee is a company, We require the information as listed above for Australian Companies.</li><li>• Each signatory to be identified as per the above 'Individual' identification requirements</li></ul>
<b>SELF MANAGED SUPERANNUATION FUNDS (SMSFs)</b>	<p>A current copy of the ABN Lookup request (<a href="http://ABR.business.gov.au">http://ABR.business.gov.au</a>) confirming the trust is regulated by the ATO (the copy should confirm the full name of the trust and that the trust is currently active).</p> <p>N.B. If your SMSF can be found in the lookup, individuals can be verified electronically.</p>

---

APPLICABLE TO ALL OF THE ABOVE: For security purposes, please attach a bank statement for direct debit requests confirming account details

Please provide Us with certified copies of the above documents

The following parties can certify documents: a legal practitioner, a judge, a magistrate, a Justice of the Peace, a police officer, a permanent employee of the Australian Postal Corporation with 2 or more years of service, a finance company director/partner with 2 or more years of service, an officer with, or authorised representative of, a holder of an Australian financial services licence, a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership Dentist, Chiropractor, Medical practitioner, Nurse, Pharmacist, Optometrist, Patent attorney, Physiotherapist, Psychologist, Trade marks attorney, Veterinary surgeon, Bailiff, Bank officer with 5 or more continuous years of service, Building society officer with 5 or more years of continuous service, Finance company officer with 5 or more years of continuous service, Marriage celebrant, Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955 ), and all other persons prescribed by Regulation 4 of the Statutory Declarations Regulations.

<sup>1</sup> Please contact us for a copy of the Beneficiary Declaration form

## Key Facts Sheet

### Key facts about this credit card

Correct as at: 1 August 2014

This information sheet is an Australian Government requirement under the National Consumer Credit Protection Act 2009

### Description of credit cards

Product name	Signature Credit Card	Platinum Credit Card
Minimum credit limit	\$15 000	\$6 000
Minimum repayments	<i>You must pay the minimum payment due shown on each monthly credit card statement on or before the due date, giving due consideration to processing times for each payment method. However, if that day is not a business day, it is due on the next business day. The minimum amount owing is calculated as the greater of \$20 or 2% of the closing balance (rounded to the nearest 2 decimal points). If the closing balance is less than \$20, then the minimum payment due is equal to the closing balance. In addition, you must pay any amount in excess of the credit limit and any amount shown on the monthly credit card statement as overdue. These amounts are due and payable immediately.</i>	<i>You must pay the minimum payment due shown on each monthly credit card statement on or before the due date, giving due consideration to processing times for each payment method. However, if that day is not a business day, it is due on the next business day. The minimum amount owing is calculated as the greater of \$20 or 2% of the closing balance (rounded to the nearest 2 decimal points). If the closing balance is less than \$20, then the minimum payment due is equal to the closing balance. In addition, you must pay any amount in excess of the credit limit and any amount shown on the monthly credit card statement as overdue. These amounts are due and payable immediately.</i>
Interest on purchases	20.50%	20.50%
Interest-free period	There is an interest free period on <i>your</i> card account of up to 55 days on <i>purchases</i> and other debits other than <i>cash advances and balance transfers</i> .	There is an interest free period on <i>your</i> card account of up to 55 days on <i>purchases</i> and other debits other than <i>cash advances and balance transfers</i> .
Interest on cash advances	20.50%	20.50%
Balance transfer interest rate	20.50%	20.50%
Annual fee	\$400	\$150
Late payment fee	\$0.00	\$0.00

There may be circumstances in which you have to pay other fees. A full list of current fees applicable to these credit cards can be obtained from [boqspecialist.com.au/card](http://boqspecialist.com.au/card).

For more information on choosing and using credit cards visit the ASIC consumer website at [moneysmart.gov.au](http://moneysmart.gov.au)

The terms on which this credit card is offered can change over time. You can check if any changes have been made by visiting [boqspecialist.com.au/card](http://boqspecialist.com.au/card).

This page has been intentionally left blank



**Client service centre**  
**T 1300 160 160**  
**boqspecialist.com.au**

---

**Adelaide**

Suite 5  
121-129 Hutt Street  
Adelaide SA 5000  
T +61 8 8203 9100  
F +61 8 8227 0066

**Brisbane**

Level 8  
Riverside Centre  
123 Eagle Street  
Brisbane QLD 4000  
T +61 7 3018 8100  
F +61 7 3018 8108

**Melbourne**

Level 49  
120 Collins Street  
Melbourne VIC 3000  
T +61 3 8660 1000  
F +61 3 8660 1010

**Perth**

Level 3, Suite 31  
22 Railway Road  
Subiaco WA 6008  
T +61 8 9214 4500  
F +61 8 9214 4545

**Sydney**

Level 23  
The Chifley Tower  
2 Chifley Square  
Sydney NSW 2000  
T +61 2 9293 2000  
F +61 2 9293 2166