

Eurocard Corporate Gold

Product agreement (to be filled out by Eurocard)

Corporate card with corporate payment liability

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Company information All fields are mandatory. The application will be read electronically.

Company name												Business ID			
Address															
Postal code				City											
Company's contact person for card related matters										Contact person's telephone number					
Contact person's e-mail address															
Possible corporation/parent company												Date when the company was founded ¹⁾			
Company name in the form it will be printed on the card (max 27 characters)															

¹⁾ Please attach the balance sheet and the income statement to the application if the company has operated less than 3 years.

Invoicing details	<input type="checkbox"/> Individual invoice	<input type="checkbox"/> Combined invoice	
Invoicing address	<input type="checkbox"/> Cardholder's home address	<input type="checkbox"/> Company address	<input type="checkbox"/> Invoicing address, if different from company address
OVT Number and Operator ID for electronic invoicing			

Card delivery	<input type="checkbox"/> To cardholder's home address (only with individual invoicing)	<input type="checkbox"/> To cardholder's company address	<input type="checkbox"/> To company's contact person
Due to security reasons, the PIN-code is always delivered to cardholder's home address.			

Cardholder information

Surname								First name							
Social security number				Employee-ID				Nationality (if not Finnish)							
Home address															
Postal code				City								Mobile phone			
E-mail address										Language					
										<input type="checkbox"/> Finnish		<input type="checkbox"/> Swedish		<input type="checkbox"/> English	

Company signature

If a signatory lacks a Finnish social security number, a copy of the signatory's passport must be attached with the address details in the country of residence

We have read and accepted the Eurocard Corporate terms and conditions and confirm that also all applicants have received and accepted the terms and conditions. We hereby confirm that all applicants have been informed that their personal data can be disclosed to Eurocard as a part of the card application process and that Eurocard obtains additional information about the applicants from other sources in connection with the application. We also confirm that the applicants have been informed that the transaction data related to the corporate card may be transferred to a travel account system and /or for reporting purposes.

Date	Authorized signatory		
Name in print		Social security number	
Name in print		Social security number	

Return the Application and Declaration of Beneficial Ownership to: SEB Kort, Tunnus: 5011303, Info: Application handling, 00003 REPLY MAIL ITEM.



SEB Kort Bank AB,
Helsingin sivuliike
P O BOX 1085, FI-00101 HELSINKI
Business ID: 1597729-5

Tel. 09 6939 9301
Fax. 09 6939 9429
corporatecredit@eurocard.fi

ECFI 2080 20180410 EN

