

Express delivery

Application for a corporate card agreement with corporate liability

The application is submitted by mail. Original must be submitted to Danske Bank

If the application is submitted by District. Original should not be submitted to Danske Bank.

Fields with an asterisk * are required

Company details

CVR No. *		Tel. *	
Company name * (as stated in the Central Business Register (CVR))			
Address *			
Post code *	Town *	Country *	
Name of contact *	E-mail *	Tel. *	
Company name to appear on the card (no more than 22 characters including spaces)		District No. (on transmission of electronic data)*	

Account limit *

Account limit DKK _____

Change of account limit (To be filled in only for account limit increases)

Mastercard Corporate Card account No. _____	Account limit From DKK _____ to DKK _____
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Settlement (select one option only) *

<input type="checkbox"/> Account-to-account payment	Reg. No. _____ Account No. _____
<input type="checkbox"/> Betalingsservice (direct debit) The first payment is made by way of inpayment form which is used for registering subsequent payments in Betalingsservice. (only possible if billing date is the 19 th)	
<input type="checkbox"/> OIOXML or <input type="checkbox"/> OIOUBL	EAN/GLN No. _____

Invoicing *

Select billing date: _____ (State a date between 1 and 31) Standard billing date = 19 th	Optional: We request a credit period of _____ (1-75) day(s) <u>in addition</u> to the standard credit period of 15 days.
Select 31 if you would like to be billed on the last day of any calendar month. Transactions will be billed monthly on the selected date. The due date is 15 calendar days from the billing date. No interest is added to transactions during the purchase period until the due date. See, however, clause 3.5 of the card conditions in relation to late payment and excesses.	Interest will be added during any extended credit period, subject to a variable interest rate determined by Danske Bank, subject to the list of charges. The interest rate is subject to change in accordance with Danske Bank's General Conditions.

<input type="checkbox"/> I/we wish to add Book Now Pay Later to the agreement. (Invoicing of flight tickets postponed up to 180 days.) Fee per transaction Dkk 50,-
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Electronic data (optional through District or third-party data processor)

As a supplement to the monthly billing statement, customers may also opt to receive information about card transactions electronically.	
<input type="checkbox"/> Please send us information about card transactions through District.	
File format: (select one option only) <input type="checkbox"/> Extended version 2 <input type="checkbox"/> SAP	
Data delivery: (select one option only) <input type="checkbox"/> Daily <input type="checkbox"/> Weekly _____ day <input type="checkbox"/> Monthly	
<input type="checkbox"/> For reconciliation purposes, please send us an electronic file containing all the transactions listed on our hard-copy billing statement.	
<input type="checkbox"/> Please pass on all transactional data about our Mastercard Corporate Card transactions to the third party stated below. We acknowledge that we are responsible for drawing up a data processing agreement with the third party. Data will be made available to the third party according to agreement between the third party and Danske Bank.	
Name of third-party data processor _____	
CVR. No. _____	Contact _____ Tel. _____

Mandate

The persons listed below are individually authorised to sign applications for Mastercard Corporate Cards with corporate liability to the company's employees corporate liability to our employees

jointly authorised to sign applications for. Mastercard Corporate Cards with corporate liability to the company's employees corporate liability to our employees

This mandate remains in force until Danske Bank - Card Administration receives written notification of its revocation.

Name of mandatory* (Please use block capitals.)	Name of mandatory* (Please use block capitals.)
Signature of mandatory *	Signature of mandatory *

Remember to sign here

Certification

I/we confirm that the information given in this application is true and complete, and I/we certify by my/our signature(s) that I/we have received, read and accepted the card conditions for the Mastercard Corporate Card.

This agreement applies to all cards with corporate liability issued to the company's employees.

I/we recognise owing to Danske Bank the total spending on the cards issued under this agreement as well as owing to Danske Bank any amount charged to the card account with the addition of interest, late payment interest, fees and costs.

Third-party liability is limited by Sections 97, 98 and 100 of the Danish Payment Act.

To receive a Mastercard Corporate Card with corporate liability, the employee must fill in the application form "Application for a corporate card with corporate liability" and both the employee and the authorised signatory must both sign this application.

Mastercard Corporate Card with corporate liability can also be ordered in District - Cardmodule.

I/we accept the following conditions:

- Danske Bank makes a credit assessment of the company's financial situation, which may include obtaining information from or passing on information to credit-rating agencies and financial institutions of the company's present (and previous) facilities with any company of the Danske Bank Group.
- Danske Bank may regularly make a credit assessment of the company's financial position, including any facilities the company may have with other companies of the Danske Bank Group. Consequently, information about customer relationships may be passed on to and received from other companies of the Danske Bank Group.
- Danske Bank is entitled to request the submission of financial statements for making a credit assessment of the company's financial position.
- Cardholders are entitled to the additional card benefits existing at any time
- The cardholder may use the same PIN (Single PIN) for the corporate card as the one he or she uses for one or more of his or her personal cards issued by Danske Bank. I/we agree that I/we continue to be liable for losses up to DKK 375 for each card and in certain cases up to a total of DKK 8,000 for each card resulting from the fraudulent use of the corporate card and/or corporate cards, notwithstanding that the corporate card or cards have the same PIN (Single PIN) as the PIN used for one or more of the personal cards that Danske Bank has issued to the individual cardholder. This liability applies notwithstanding the fact that the corporate card or cards have been used fraudulently in the same incident as one or more of the cardholder's other cards with the same PIN.
- The mandataries are authorised to sign the Consent allowing Danske Bank to pass on Mastercard Corporate Card transactional data to third parties (such as travel expense management systems).
- The card may be used for business purposes only, that is, to pay for expenses on behalf of the company.
- When the employee resigns from his or her position with the company, the company must immediately make sure that the card is blocked, and retrieve the card and send it to Danske Bank.

Danske Bank exchanges information with business partners for the purpose of establishing and managing additional benefits for cardholders and handling insurance claims. Details on business partners are available by request on tel. +45 70 25 10 15.

Danske Bank receives commission when the cardholder uses the card at merchants.

If we allow Danske Bank to pass on transactional data to a third party, we acknowledge that

- Danske Bank is not liable for any losses arising from transmission errors, such as data being damaged, mutilated or destroyed during transmission to the third party
- Danske Bank is not liable for any losses arising from the circumstances of the third party, including but not limited to the systems, servers and networks of the third party and the fact that data may be damaged, mutilated, destroyed or subjected to unauthorised use
- Danske Bank's General Conditions apply to this business arrangement

Name of authorised signatory * (Please use block capitals.)	Name of authorised signatory * (Please use block capitals.)
Date *	Date *
Signature of authorised signatory *	Signature of authorised signatory*

Remember to sign here

Original application must be submitted to Danske Bank by District or physical mail.

Danske Bank · Att.: Card Administration · 2-12 Holmens Kanal · 1092 Copenhagen K
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