

American Express® Corporate Card Individual Application

Joint & Several Liability

www.americanexpress.co.in



American Express Banking Corp.
Cyber City, Tower C, DLF Bldg. No. 8, Sector - 25
DLF City Phase - II, Gurgaon - 122002, Haryana

Form-4 | Ver. 3, 01/09

For Office use only

Corporate ID | HIR | CAP | APVDEC | CX

Cost Centre _____ Source Code _____



American Express® Corporate Card Individual Cardmember Application

Joint & Several Liability

Please mail completed application to:

American Express Banking Corp.
 Cyber City, Tower C, DLF Bldg. No. 8, Sector - 25
 DLF City Phase - II, Gurgaon, Haryana - 122002

Completion of all fields is mandatory

Personal Information	
Name as desired on the card (Maximum 20 Characters including word space)	
<input type="text"/> (Please underline your family name)	
Title <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other: _____ <small>(please specify)</small>	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Name of Applicant: _____ <small>First Middle Last</small>	
Nationality: _____ Date of Birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DD MM YY</small>	
PAN/GIR No.: _____	
Passport No.: _____ Date of Expiry: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DD MM YY</small>	
Driving Licence No.: _____	
Residential Address: _____ _____ _____	
City: _____ PIN: _____	
Tel.: _____ Mobile: _____	
Are you a current / past American Express Cardmember? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please give Card number(s)	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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Work Related Information
Company Name: _____
Corporate ID: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Work Address: _____ _____
City: _____ PIN: _____
Tel.: _____ Extn: _____ Fax: _____
Official E-mail Address: _____ _____
Your Designation: _____
Years with Company: _____ Employee No.: _____
If you have worked for less than one year with the current company, please also provide details of your previous employer:
Company Name: _____
Position in Company: _____
City: _____ Tel.: _____
Financial Information
Gross annual taxable Income (Rupees): _____ <i>(Please attach latest copy of TDS Form 16 / last income tax return acknowledged by ITO or latest salary certificate from employer)</i>
Details of your personal bank account:
Name of Bank: _____
Address: _____ _____
City: _____ PIN: _____
Tel.: _____ Account No: _____
Additional Information
Address to which we should mail your Billing Statements: <input type="checkbox"/> Residence <input type="checkbox"/> Work
Please sign me up for the Express Cash Facility*: <input type="checkbox"/> Yes <input type="checkbox"/> No
<small>*This request is valid and will be processed only if your company is enrolled for this facility.</small>

Joint Declaration by the Company and the Individual:
The applicant and the undersigned company through its authorised Corporate Officer(s) request American Express Banking Corp. ("AEBC") to issue an American Express Corporate Card ("Corporate Card") on the company account to the applicant including any renewals and replacements thereof, authorise AEBC to obtain and exchange credit information about the company and the applicant from any source including but not limited to Banks and Credit Bureaus, authorise AEBC to share/use the personal information (other than the individual's financial information) provided in this application and transaction details of the company account for availing any special benefits or services by the company/applicant under the Corporate Card and for any marketing purposes. I/We agree to be jointly and severally liable for all charges incurred on the Corporate Card issued to the applicant and be bound by the American Express Corporate Cardmember Agreement. I/We declare and undertake that one photo identification proof (Valid PAN card /Passport* /Driving Licence* /Electoral Card*) and one proof of address (Latest Bank statement /Utility Bill/ Ration Card) of the Cardmember are available with us and can be provided to AEBC for verification purposes as and when required. I/We declare and undertake that the Corporate Card issued to those persons named by the company, if used overseas shall be utilized strictly in accordance with the relevant Exchange Control Regulations, issued and as amended by the Reserve Bank of India ("RBI") from time to time. In the event of any failure to comply with the prevailing Exchange Control Regulations issued by RBI, by any persons is named by the company, the said person shall be liable for any action under the Foreign Exchange Management Act, 1999, as amended from time to time, and be debarred from the Corporate Card facility either at AEBC's instance or by the RBI. I/We understand that the Corporate Card will be issued at the sole discretion of AEBC and if approved will be delivered within 15 working days of the complete application with any/all supporting documents being received by AEBC. T&C -
<small>*Also valid for address proof</small>
Applicant's Signature _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DD MM YY</small>
Applicant's Name: _____
Signature of Authorised Signatory and Company Seal _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>DD MM YY</small>
Name of Authorised Corporate Signatory _____
Designation: _____ Tel.: _____