

On the following pages, please complete all relevant fields, print the document, sign it for approval on the last page, and return a scanned copy to us via email. Make sure you include all required documents with your change request. Please note that all changes you indicate in this document are still subject to approval by your acquirer. You will be informed once changes are approved and carried through successfully.

Merchant name (as on existing contract)	
Merchant ID(s)	
Acquirer name	
Account change(s) valid from (date)	

ΡL	EASE INDICATE THE CHANGE(S) TO BE MADE
	1) Company details (Please complete section 1)
	2) Owner/director details (Please complete section 2)
	3) Website(s) (Please complete section 3)
	4) Products/pricing (Please complete section 4)
	5) Bank account details (Please complete section 5)
	6) Descriptor (Please complete section 6)
	7) Rate(s) and fee(s) (Please complete section 7)
	8) Payment terms (Please complete section 8)
	9) Processing/Settlement currencies (Please complete section 9)
	10) Fraud Prevention (Please complete section 10)
	11) Account closure (Please complete section 11)
	12) Any other changes (Please complete section 12)

#### 1 NEW COMPANY DETAILS

Company legal name	If changed
Commercial registration number	If changed
Street and house number	If changed
Postcode / zip code	If changed
City	If changed
State (if applicable)	If changed
Country	If changed
Office Telephone number (including international prefix)	If changed
Office Fax number (including international prefix)	If changed

Please supply us with the official documents regarding the change in company details.



#### NEW OR CHANGED PARENT COMPANY DETAILS

Legal name (of parent company)	lf changed
Commercial registration number (of parent company)	lf changed
Street and house number (of parent company)	lf changed
Postcode / zip code (of parent company)	lf changed
City (of parent company)	lf changed
State (of parent company)	lf changed
Country (of parent company)	lf changed
Other (of parent company)	lf changed

Please supply us with the official documents regarding the change in company details.

ć	NEW OWNER / DIRECTOR DETAILS			
	Director first name			
	Director last name			
	Director date of birth (YYYYMMDD)			
	UB0 <sup>1</sup> first name			
	UB0¹ last name			
	UB0 <sup>1</sup> date of birth (YYYYMMDD)			
	UB0 <sup>1</sup> ownership %			

Please supply us with the official documents regarding the change in company details, including valid passport copies of the director(s)/UBO(s)<sup>1</sup>.

 $^{\mbox{\tiny 1}}$  UBO (Ultimate Beneficial Owner) is a natural person owning (part of) the company.

3	CHANGED WEBSITE(S)			
	Please list the website(s) you wish to <u>remove</u> from your account			
	Will this removal affect monthly sales volumes? (if yes, specify by how much)			
	Please list the website(s) you wish to <u>add</u> to your account (include username/password if applicable)			
	Will this addition affect monthly sales volumes? (if yes, specify by how much)			

Please note: official policy requires all websites to comply with card scheme regulations and all websites need to be owned by the merchant, its parent company, or its UBO(s) <sup>1</sup>. Only websites compliant with this policy can be accepted.



4	NEW PRODUCTS / PRICING	
	Additional products / services offered	If changed
	New avarage transaction value (including currency)	If changed
	New highest transaction value (including currency)	If changed
	New monthly transaction value (including currency)	If changed

5	NEW BANK ACCOUNT DETAILS	
	Name bank account holder	
	Bank account number	
	Bank account currency	
	BIC/SWIFT code	
	IBAN number (for EU and certain non-EU banks)	If applicable
	Bank sort code	lf applicable
	Reference / ABA / routing number	If applicable
	Bank name	
	Bank street and house number	
	Bank postcode / zip code	
	Bank city	
	Bank country	
	Bank contact person	
	Bank contact phone number (including international prefix)	
	Additional details	If applicable

Please supply us with a copy of the new bank account statement or official bank letter (stating account holder name and bank account number). The old bank account should be kept open for at least 4 weeks after the change has been made (since scheduled payments may still go out to the old bank account).

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Please note: descriptor should be alphanumerical, no special characters, not starting with a number (for adding or changing 'dynamic' descriptors, please contact your Account Manager)



# 7 RATE(S) AND FEE(S) 6 Current rate(s) or fee(s) (also mention card types) 7 New rate(s) or fee(s) (also mention card types)

8	PAYMENT TERMS	
	Current payment terms	
	New payment terms	

9	PROCESSING / SETTLEMENT CURRENCIES	
	Additional processing currencies (also list related settlement currency)	
	Additional settlement currencies	

10	FRAUD PREVENTION	
	Current settings	
	New settings	

11	ACCOUNT CLOSURE	
	Immediate closure	Future closing date (YYYYMMDD)
	Reason for closure	

12	OTHER	CHANGES	(IF ANY,	PLEASE	DESCRIBE)
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We herewith authorize to carry out the abovementioned changes to our existing contract, with effect from the validation date. For approval, below fields should be completed and signed by an authorized signatory.

FOR APPROVAL, BELOW FIELDS SHOULD BE COMPLETED AND SIGNED BY AN AUTHORIZED SIGNATORY						
Name		Signature				
Position						
Place						
Date						