



MasterCard Corporate Card application form Individual billing, individual settlement with private liability



All requested fields are mandatory. Please allow up to 15 business days for processing.

Please have this application form signed off by the Company's Card Programme Administrator and return it to:
**cardapplications@bcc.airplus.com or by post to:
BCC Corporate - Customer Service - 66 Boulevard de l'Impératrice, B-1000 Brussels**

In order to improve readability and to avoid delays in processing this application form, please fill in this document electronically. If not possible, you can also print it and complete it by hand writing, using CAPITAL LETTERS in blue or black ink.

1. Professional Details

Client reference	C	H																	
Company name																			
VAT number																			
Enterprise number																			
Street																			
House number																			
ZIP Code										City									
Country																			
Desired monthly spending limit										EUR									
Employee number (if applicable)																			
Cost center (if applicable)																			
Gross income (Monthly)										EUR									

2. Personal information

Title	<input type="radio"/> Mr.	<input type="radio"/> Mrs.	
First Name			
Last Name			
Street			
House number			
ZIP Code		City	
Country			
Nationality			
Date of birth	D D M M Y Y Y Y	Country of birth	
Place of birth			
Mother's first name (used for identification purposes)			
Language	<input type="radio"/> Dutch	<input type="radio"/> French	<input type="radio"/> English
Mobile phone*			
Office phone*			
E-mail address*			

* This e-mail address/telephone number will be used for servicing

By ticking off this box, I hereby declare that the above mentioned contact details (including but not limited to: e-mail, telephone, SMS, MMS or Voice Mail) may not be used by BCC Corporate for Direct Marketing Purposes and shall be used in accordance with the General Terms and Conditions.



3. Personal Bank Details

Bank Name																											
Bank account number (IBAN code)																											
BIC (Bank Identifier Code)																											
Payment method	<input type="radio"/> Direct Debit (Please fill in a Direct Debit mandate) <input type="radio"/> Bank Transfer																										
My monthly Card statements should be sent to	<input type="radio"/> Private address <input type="radio"/> Professional address																										

4. Signature of the Card Applicant

Please join:
 - For Belgian residents, copy (both sides) of valid Belgian ID.
 - For all others, copy (both sides) of valid EU Identity card or valid international passport.
 Low quality documents will be rejected and you will be asked to provide a higher quality copy.

The Undersigned warrants that he/she has read and understood the General Terms and Conditions attached hereto. The General Terms and Conditions are also available on the website at www.bcc-corporate.be in the section 'Documents'. A copy of these General Terms and Conditions may be requested from BCC Corporate - 66 Boulevard de l'Impératrice, B-1000 Brussels, tel: +32 (0)2 205 87 87. This agreement shall be effective upon approval by BCC Corporate of this application, or once the card is activated, or after first use of the Card(s), whichever occurs first, all of which, including signing of the Application, constitute acceptance of the General Terms and Conditions.

Data Protection

The Undersigned hereby attests to the truth and accuracy of the information provided in this Application Form and hereby gives its consent to BCC Corporate to handle its Personal Data. BCC Corporate handles Personal Data in its capacity as Data Controller in accordance with the provisions of the Privacy Statement set out in the General Terms and Conditions. These data are used by the Data Controller to manage customer relations, to comply with legal requirements, for its own commercial purposes and to prevent and combat abuse. The customer may object to the use of these data for direct marketing purposes. Since the employer has selected a Corporate Card, the Company's contact person may access the personal data relating to transactions by the Cardholder. To inspect and correct data processed, please contact BCC Corporate - Customer Service, 66 Boulevard de l'Impératrice, B-1000 Brussels.

BCC Corporate may request additional information prior to the issuance of this card and may reject this Application at its discretion.

Signature																												
Date	D	D	M	M	Y	Y	Y	Y	Place																			

5. Signature of the Company's Card Programme Administrator

It is essential that this form is signed off by the Company's Card Programme Administrator. Each signer of this application guarantees the correctness of the data. Each signer agrees to the General Terms and Conditions. On behalf of the Company I confirm that the details supplied by the applicant are correct. I hereby confirm that the applicant is employed by the Company and attach herewith a copy of the applicant's identity document, the original of which has been seen by the Company. I hereby approve the applicant's Card application.

Name																												
Job title																												
Signature																												
Date	D	D	M	M	Y	Y	Y	Y	Place																			