



MERCHANT SERVICE APPLICATION FORM

Instructions

Read through before completing this application. If you are not sure, please contact BSP Call Centre 320 1212 / 7030 1212 in PNG or your nearest BSP Branch for assistance.

Select your request type: New Amendment Termination

Select preferred service: BillPay e-Commerce

PNG Only: Mobile Merchants School Fee Payments

PRINT IN BLOCK CAPITAL LETTERS in a blue or black pen to complete the required sections

Section A: Merchant Details

Registered Company or Business Name: _____ Registered Company or Business Number: _____

(For Education Payments)

School / Institution Name: _____

Postal Address

PO Box Number: _____ Post Office Name: _____ Town/City: _____

Province/State: _____ Country: _____ Postal Code: _____

Nominated Mobile: _____ Nominated Email: _____

Principle Place of Business

Sect/Lot: _____ Street: _____ Town: _____

Province/State: _____ Country: _____

Contact

Name of Contact Person: _____ Position: _____

Mobile: _____ Telephone: _____ Email: _____

Section B: Business Details

Business Type

Sole Trader Company Limited Liability Non-Profit Organization Superannuation
 Partnership Franchise Corporation Government Others _____

Industry Type

Airline Hotel / Accommodation Marketing & Advertising
 Insurance Travel Agent Charity
 Electronics / IT Internet Service Provider (ISP) Import / Export
 Finance Transport & Logistics Retail (e.g. Trade Store, Supermarkets)
 Education Childcare / Primary Real Estate & Property Development Government Entity
 High School / Secondary Others (specify) _____
 Tertiary / Colleges

Section C: Payment Methods

i. How do you receive payments for your good / services?

Cash EFTPoS Internet Banking Cheque State value:

	K	Monthly	K	Annually
_____	_____	_____	_____	_____

ii. How do you pay for your business expenses?

Cash EFTPoS Internet Banking Cheque State value:

	K	Monthly	K	Annually
_____	_____	_____	_____	_____

TOTAL:

	K	Monthly	K	Annually
_____	_____	_____	_____	_____

Section D: Nominated Accounts

If you are applying for BillPay, Mobile Merchant or School Fee Payments, please nominate your account(s) here.

Nominated Account

Branch	Account Name	BSB/Branch Code	Account Number	Preferred Service
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Section E: BSP e-Commerce

Complete this section if you are applying for e-Commerce.

Website Information

URL _____	Hosting Company _____	Website Content Management System _____
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Choose your currencies

<input type="checkbox"/> PGK	<input type="checkbox"/> AUD	<input type="checkbox"/> USD	<input type="checkbox"/> JPY	<input type="checkbox"/> SGD	<input type="checkbox"/> HKD
<input type="checkbox"/> NZD	<input type="checkbox"/> VUV	<input type="checkbox"/> SBD	<input type="checkbox"/> TOP	<input type="checkbox"/> WST	<input type="checkbox"/> Others _____

SSL Certificate Type

Verisign Thawte Others _____ SSL Validity From: _____ To: _____

IT Contact Person

Name: _____ Phone: _____ Email: _____

Nominated Account

Branch	Account Name	BSB/Branch Code	Account Number
_____	_____	_____	_____

Section F: Declaration

(The declarations made in this section are for all services applied for by the merchant in this application including their subsequent terms and conditions.)

- As the Merchant, I have read and understood the Terms and Conditions of these services. By executing this application, I accept the conditions herein and agree to be bound by this agreement in the use of the BSP Merchant facility (ies).
- My obligations in relation to my nominated account and the service provided by the Bank, are subject to the Bank’s terms and conditions governing these accounts.
- The Bank may request for specific documentation from me, in order to process the application for BSP Merchant facility (ies). By signing this declaration, I warrant that I am authorized by the Company/Organisation to sign and I confirm that the information provided is true and correct.
- Upon signing the Letter of Offer and Terms and Conditions by me, I will be legally bound to this agreement immediately after the Bank installs equipment to commence processing transactions.
- I agree that any information provided in this application will be used by the Bank and any Service Provider to assess this application for a new Merchant Facility or upgrade of BSP Merchant Facility for product research and development purposes.
- If I fail to provide the requested information, or do not agree to any specific terms, the Bank may refuse this application.

Principal Signatory 1

Full Name: _____
 Position: _____
 Signature: _____
 Date: _____

Principal Signatory 2

Full Name: _____
 Position: _____
 Signature: _____
 Date: _____

Principal Signatory 3

Full Name: _____
 Position: _____
 Signature: _____
 Date: _____



BANK USE ONLY

MERCHANT SEGMENT

- Micro SME Corporate Government Education

BRANCH

Branch: _____

Country: _____

- I confirm that the application has been completed accurately.
 I confirm that I have verified the identity of the signatories.

Checked by:

Authorised by:

Name: _____

Name: _____

Date: _____

Date: _____

RETAIL PAYMENTS

BillPay

Biller Code: _____

Mobile Merchant

Mobile Merchant ID: _____

School Fee Payments

School Code: _____

e-Commerce

Select Currency

- PGK AUD USD JPY SGD HKD
 NZD VUV SBD TOP WST Others _____

Approval

Authorising Manager/Head

- Approved Declined

General Manager

- Approved Declined

Comments

Comments

Name: _____

Name: _____

Signature: _____ Date: _____

Signature: _____ Date: _____