

Application: PostFinance Card Pay for business customers

To be completed by PostFinance

Postal account number _____
Account currency CHF EUR

Partner number _____
Locality code _____

All references to persons apply to both genders and to more than one person.

1. Contractual partner

Company _____
Street, no. _____
Postcode _____ Location _____ Country _____
Contact person Last name _____ First name _____
Telephone _____

2. Card application

The PostFinance Card Pay can only be used to make payments into your own account at Swiss Post branches. This card is subject to a fee. It is not person-specific and can also be used by people without sole signing authority.

Language	Number of cards (subject to a fee)
<input type="checkbox"/> German	_____
<input type="checkbox"/> French	_____
<input type="checkbox"/> Italian	_____
<input type="checkbox"/> English	_____

Comments

Mailing address

Please send the cards to:
 Address noted under point 1 (contractual partner)
 to the following address
Company _____
Last name _____ First name _____
Street, no. _____
Postcode _____ Location _____ Country _____

You can view the Subscriber Conditions – Physical and digital PostFinance Cards at www.postfinance.ch/legal-information. They are deemed to have been accepted the first time the card is used.

Postcode _____ Location _____ Date _____

Signature _____ Signature _____
(For collective signatures, two signatures are required from the executive bodies/owners or authorized representatives)

Please send the form to: PostFinance Ltd, Scan Center, 3002 Berne

