

OP Corporate Gold Card management

With OP Corporate Gold Card management the company gets an overview of invoices, payments and transactions on cards and the possibility to administer and order new cards online.

Business ID												clara												
		Offici	al name	of the co	ompan	У																		
Invoicing address																								
Postcode	City																							
Country																								
Country																								
Administrator rights (only o	ne choice	e)																						
lease specify which access rights t																								
Super administrator – with ext the company have applied for, i																								
ownership and more.	notaanig tiro		ppty to:		a o a i i o			00 44		ra to pi	ovido		1100101	. 0000		, o p c	,,	ota a m	.6	0111101		50000		orac
Super administrator – has acc															nd ac	counts	s and a	admir	ister	card	and	accou	ınts, c	of
cards. Also authorized to provid	le informatio	on about ti	he comp	oany, inc	luding	inforr	nation	about	benefi	cial ov	vnersh	nip an	d mor	e.										
Administrator																								
irst name						Surna	me																	
]																		T	
					1																			
lordic social security number (SSN)	*																							
lordic social security number (SSN)	*		<u> </u>] Idon	ot hav	e a No	rdic soo	sial se	curity	numbe	er. Ent	er noi	n-nord	lic SSN	V*:	 								
	*			Idon	ot hav	e a No	rdic soo	cial se	curity	numbe	er. Ent	er noi	n-nord	lic SSN	N*:									
	*			Idon	ot hav	e a No	rdic soo	cial se	curity	numbe	er. Ent	er noi	n-nord	lic SSN	N*:									_ _ 1
nter citizenship(s). State up to five.				Idon										dic SSM	N*:]
inter citizenship(s). State up to five.				Idon			rdic soc							dic SSN	N*:			 						_ _]
inter citizenship(s). State up to five.				Idon										dic SSN	N*:]
inter citizenship(s). State up to five.				Idon										dic SSM	N*:									_ _]
Enter citizenship(s). State up to five.				Idon										dic SSM	V*:									
Enter citizenship(s). State up to five. Phone number day (including countr	y code)	tions on re	equired		+	Mobile								dic SSN	N*:									
Enter citizenship(s). State up to five. Phone number day (including countr	y code)	tions on re	equired		+	Mobile								dic SSM	V*:									
inter citizenship(s). State up to five. Phone number day (including countries—mail address Please see page 2 for information	y code)	tions on re	equired		+	Mobile								dic SSN	N*:									
Enter citizenship(s). State up to five. Phone number day (including countremails address Please see page 2 for information Signature	y code)	tions on re	equired		+	Mobile								dic SSN	N*:									
Enter citizenship(s). State up to five. Phone number day (including countremails address Please see page 2 for information Signature Signature of super administra	y code) and instruct			docume	+ entation	Mobile	phone	numl	per (inc	luding	coun	ttry co	de)											
Phone number day (including countremail address Please see page 2 for information Signature Signature of super administra have read the OP Corporate Gold Ca	y code) and instruct			docume	+ entation	Mobile	phone	numl	per (inc	luding	coun	ttry co	de)			data	may b	e proc	cesse	ed in a	ccorc	dance	witht	he
Enter citizenship(s). State up to five. Phone number day (including countr E-mail address * Please see page 2 for information Signature Signature of super administra have read the OP Corporate Gold Ca	y code) and instruct			docume	+ entation	Mobile	phone	numl	per (inc	luding	coun	ttry co	de)			data	may b	e proc	cesse	and in a	ccorc	dance	with t	he
Enter citizenship(s). State up to five. Phone number day (including countr E-mail address * Please see page 2 for information Signature Signature of super administra I have read the OP Corporate Gold Caterms and conditions.	y code) and instruct	nent terms	s and co	docume	+ entation	Mobile	phone	numl	per (inc	luding	coun	ttry co	de)			data	may b	e proc	cesse	and in a	cccorc	dance	with t	hhe



OP Corporate Gold Card management

Company ID number

Page 2

Authorized signatory This form must be signed by the authorized signatories in accordance with the official information in the Trade/Business register or by persons, who have been granted a power of attorney to sign on behalf of the company.								
We hereby confirm the information provided and authorize the above person to administer our card- (available on Eurocards webpage or requested from Eurocard) and undertake to comply with them.	s and accounts. Furthermore we have read and agreed to the pricelist and the Terms and Conditions							
Place and date	Company name							
Authorized signature	Authorized signature							
Name in block letters	Name in block letters							
Nordic social security number (SSN)*	Nordic social security number (SSN)*							
If a Nordic SSN is missing, enter non-nordic SSN*	If a Nordic SSN is missing, enter non-nordic SSN*							
Enter citizenship(s). State up to five.	Enter citizenship(s). State up to five.							
Email address	Email address							
Mobile number	Mobile number							
* To confirm the identity of the authorized signatory as well as the admin	istrator the following documentation must be attached:							
Person with a Nordic Social Security Number - Certified** copy of a valid ID document (e.g. Passport or National ID)								
Person without a Nordic Social Security Number - Certified** copy of a valid ID document (e.g. Passport or National ID) - Documentation of the person's foreign home address								
** The person certifying the ID copy should write "true copy" or similar in local language, and mu	ust add their name, phone number, and signature.							