

**1. Company information (mandatory)**

1a Company name

1b Company account number   
11 Digit reference number shown on the top of the company statement.

**2. Change company contact details (optional)**

2a New company name   
Change of company name is only possible when the Chamber of Commerce number does not change. Please also send in a recent certificate of registry.

2b New name on cards   
Maximum 21 characters (including spaces).

2c New name on existing cards?  No  Yes  
If you would like the new name on your existing cards, all cards will be blocked first before replacement. This means your cardholders are temporarily unable to use their cards.

2d New address

2e Postal code

2f Town/City

2g Country

**3. Change Programme Administrator details 1 (optional)**

3a Add/delete Programme Administrator or change information  Add  
 Delete  
 Change information  
 Read-only access to the ING Commercial Card portal

3b Surname and initials

3c Gender  Male  Female

3d Date of birth  -  -  dd-mm-yyyy

3e Password   
We will ask for your password whenever you call us. Your password should have no more than 12 characters.

3f Mobile number (incl. country code) +

3g Landline (incl. country code) +

3h New E-mail address   
The login credentials for the ING Commercial Card portal will be send to this email address. No email address from a colleague or a general email address such as info@, admin@, etc.

3i Signature

Please continue on the next page.

#### 4. Change Programme Administrator details 2 (optional)

- 4a Add/delete Programme Administrator or change information
- Add
  - Delete
  - Change information
  - Read-only access to the ING Commercial Card portal

4b Surname and initials

4c Gender  Male  Female

4d Date of birth   -   -     dd-mm-yyyy

4e Password

We will ask for your password whenever you call us. Your password should have no more than 12 characters.

4f Mobile number (incl. country code)

+

4g Landline (incl. country code)

+

4h New E-mail address

The login credentials for the ING Commercial Card portal will be send to this email address. No email address from a colleague or a general email address such as info@, admin@, etc.

4i Signature

#### 5. Change limit (optional)

Currency as used in original application.

5a Permanent change company monthly limit

5b Temporary change company monthly limit (max. 3 months)

5c from (date)

-   -     dd-mm-yyyy

5d until (date)

-   -     dd-mm-yyyy

#### 6. Other particulars (optional)

6a Old IBAN

6b Old BIC

6c New IBAN

6d New BIC

6e Change correspondence language

- Dutch
- English
- French
- German
- Spanish
- Italian

Please continue on the next page.

**6. Other particulars (optional) (continuation)**

- 6f Paper statement for the company  Yes  No  
For the cost of paper statements see brochure 'Tariffs ING Corporate Card'.
- 6g Paper statement for all cardholders  Yes  No  
For the cost of paper statements see brochure 'Tariffs ING Corporate Card'.
- 6h Change of destination for card dispatch  Employee  
 Programme Administrator, name  
\_\_\_\_\_
- 6i Cancel ING Corporate Card Programme (all cards)  Yes  
All cards will be blocked immediately and can no longer be used.

**7. Signature Programme Administrator (mandatory)**

- 7a Date   -   -     dd-mm-yyyy
- 7b Town/City \_\_\_\_\_
- 7c Surname and initials \_\_\_\_\_
- 7d Signature \_\_\_\_\_  
\_\_\_\_\_

**8. Signature company (Mandatory in case of adding a Program Administrator)**

This form must also be signed by the authorised signatory/signatories of the company in case of adding a Programme Administrator (the company declares that it established the identity and the signature of the added Programme Administrator(s) on the basis of a valid identity document).

- 8a Date   -   -     dd-mm-yyyy
- 8b Town/City \_\_\_\_\_
- 8c Name authorised signatory of the contracting party \_\_\_\_\_
- 8d Position \_\_\_\_\_
- 8e Signature authorised signatory \_\_\_\_\_  
\_\_\_\_\_

- 8f Date   -   -     dd-mm-yyyy
- 8g Town/City \_\_\_\_\_
- 8h Name authorised signatory 2 \_\_\_\_\_
- 8i Position \_\_\_\_\_
- 8j Signature authorised signatory 2 \_\_\_\_\_  
\_\_\_\_\_

## 9. Mailing address and what to send

Checklist of items to be sent:

- This form completed and duly signed
- Company name change: a recent certificate of registry

Please send all items to:

ING Corporate Card  
PO Box 22005  
8900 KA Leeuwarden  
The Netherlands

or scan everything and mail to [corporate.card.backoffice.nl@ing.com](mailto:corporate.card.backoffice.nl@ing.com)



**1. Account owner**

**1a** Name \_\_\_\_\_  
Name of company (Corporate Pay) or person (Individual Pay) to whom the statement is addressed.

**1b** Address \_\_\_\_\_

**1c** Postal code \_\_\_\_\_

**1d** Town/City \_\_\_\_\_

**1e** Country \_\_\_\_\_

**2. Creditor**

**2a** Name \_\_\_\_\_

**2b** Address \_\_\_\_\_

**2c** Creditor ID \_\_\_\_\_

**3. Reference of payment**

**3a** Reference \_\_\_\_\_

**3b** Type of payment \_\_\_\_\_

**3c** Collection frequency \_\_\_\_\_

**4. Bank information**

If you have chosen Corporate Pay, please fill out the company's bank data here. For an Individual Pay Mandate, please fill out the cardholder bank data here.

**4a** IBAN \_\_\_\_\_

**4b** BIC \_\_\_\_\_

**4c** Bank name \_\_\_\_\_

## 5. Authorisation direct debit

By signing this mandate form, you authorise (A) ING Corporate Card to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from ING Corporate Card. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

5a Date  -  -  dd-mm-yyyy

5b Town/City

5c Surname and initials  
account owner

5d Signature account owner

5e Surname and initials 2nd  
account owner\*

5f Signature 2nd account owner\*

\* If applicable.

## 6. To be completed by the creditor (ING)

6a Mandate reference

## 7. Mailing address

Please send this form together with the application or mutation form to:  
ING Corporate Card  
PO Box 22005  
8900 KA Leeuwarden  
The Netherlands

or scan all documents and mail to [corporate.card.backoffice.nl@ing.com](mailto:corporate.card.backoffice.nl@ing.com)

