## Programme/nominated travel administrator



For Corporate Charge Card/Purchasing Card/Corporate MultiPay/Business Travel Solution

Useful information					
Please write clearly in the white spaces with capital letters or cross the boxes.  Please cross through all sections which are not completed.  For changes to existing administrator's details, see overleaf.  References to "programme/nominated travel administrator", please delete as appropriate.			* Fields marked with an asterisk must be completed.  References to "I" / "we" / "our" or "the Business" in Sections 1 to 5 are the Business named below and (as the context requires) to the Business and financial and other affairs of that Business.  Once completed please send to Lloyds Bank Card Services, PO Box 6061, Milton Keynes, MK7 8LE.		
1 Business and programme details					
Business name*  Programme number*			Address for correspondence/Bulk Card mailing address*  C/0  Postcode*		
Programme type:	Corporate MultiPay Purchasing Card	Corporate Charge Card Business Travel Solution	Please indicate if this address has changed  New address effective from:		
2 Removal of current programme/nominated travel administrator(s)					
Complete this section if you are removing a current programme/nominated travel administrator.  If a programme/nominated travel administrator being removed received correspondence and bulk cards please tell us the new programme/nominated travel administrator name and address in Section 1.  Changes will be effective within 7/10 days of the date of this form.			Programme/nominated travel administrator to be removed.  Full name*  Full name*		
New programme/nominated travel administrator details					
Complete this section if you are adding a new programme/nominated travel administrator.  Title, name and position*			Date of birth*  D D M M Y Y  Password (usually mother's previous name)*		
Business contact numbers and area dialling codes  Telephone*  Mobile  Fax			Do you require access to Online Card Management System 'OCMS'?  Specimen signature*	Yes No	
E-mail address*					
		Date*			

4 Changes to personal details for an existing programme	nominated travel administrator			
Complete this section if an existing programme/nominated travel administrator's details have changed.				
Existing details	New details			
Title, name and position*	Title, name and position*			
Business contact numbers and area dialling codes	Business contact numbers and area dialling codes			
Telephone*	Telephone*			
Mobile	Mobile			
Fax	Fax			
E-mail address*	E-mail address*			
Password (usually mother's previous name)*	Password (usually mother's previous name)*			
Specimen signature*	Specimen signature*			
Date*	Date*			
5 Your declaration and authorisation				
I/We confirm the details provided on this form are true and correct, and, I/We authorise the	For and on behalf of (Business name)*			
amendment of the programme/nominated travel administrator details in accordance with this form.				
This form <b>must be</b> signed in accordance with your existing Bank mandate or a Resolution.	Your signature(s)*			
	Date*			

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We may monitor or record phone calls with you in case we need to check we have carried out your instructions correctly and to help improve the quality of our service. Please remember we cannot guarantee security of messages sent by e-mail.