



New Zealand Travel Agent Application for account checklist	
PLEASE ENSURE ALL INFORMATION IS PROVIDED BEFORE SUBMITTING APPLICATION	
Virgin Australia Code (Non BSP) (if applicable)	<input type="checkbox"/>
Travel agency licence number	<input type="checkbox"/>
Valid GST & Registration number	<input type="checkbox"/>
Valid IATA number (if applicable)	<input type="checkbox"/>
Directors/Proprietors	<input type="checkbox"/>
THREE trade references	<input type="checkbox"/>
Confirmation of bank name and number (New Zealand Direct Debit Service Agreement to be signed and page 3 stamped by financial institution – N.B Applications not accompanied by the stamped agreement will NOT be processed)	<input type="checkbox"/>

New Zealand Travel Agent Application
APPLICANT INFORMATION
Please indicate account type: Credit Facility <input type="checkbox"/> or Credit Card Only <input type="checkbox"/> On an existing account <input type="checkbox"/> For a new account <input type="checkbox"/>
Please indicate whether this is an application for an API account <input type="checkbox"/>

Please complete and return to:
Virgin Australia Airlines
Transaction Services - Credit Department
newaccountregistrations@virginaustralia.com



Virgin Australia Airlines
 PO Box 1034
 Spring Hill QLD 4004
 AUSTRALIA

APPLICANT INFORMATION			
Virgin Australia Code (Non BSP):			
Group / Franchise (AMEX, NIATA, Harvey World):			
Applicant's Full Name:			
Business Full Name:			
Company Number:		GST No:	
Travel Agency's Licence No.:		IATA No:	
Business Address:			
City:	State:	Postcode:	
Postal Address:			
City:	State:	Postcode:	
Phone:		Fax:	
E-mail Address for Administrator:			
E-mail Address for Account Statements:			
Type of Business:		How long business established:	
Annual Turnover:			
DIRECTORS / PROPRIETORS			
1.	Name:	Phone:	
	Address:		
	City:	State:	Postcode:
2.	Name:	Phone:	
	Address:		
	City:	State:	Postcode:
TRADE REFERENCES (Credit Application only)			
1.	Name:	Phone/Email:	
	Address:		
	City:	State:	Postcode:
2.	Name:	Phone/Email:	
	Address:		
	City:	State:	Postcode:
3.	Name:	Phone/Email:	
	Address:		
	City:	State:	Postcode :



New Zealand Travel Agent Application for Credit Account

DEFINITIONS

Any proposed changes to details set out on the application form (including but not limited to any changes in ownership or directors) the Applicant must notify Virgin Australia in writing no later than 14 days prior to any proposed changes.

The Applicant applies for a Credit Account and confirms that the information provided above is correct and agrees to terms of the Agency Agreement.

The applicant agrees that Virgin Australia may give to and seek from any credit providers named in this credit application and any credit providers that may be named in a credit report issued by a credit reporting agency information about its credit arrangements. The Applicant understands that this information can include any information about its credit worthiness, credit standing, credit history or credit capacity that credit providers are to give or receive from each other under the privacy Act.

The Applicant understands the information may be used for the following purpose:

- To assess any application for credit.
- To notify other credit providers of a default.
- To assess its credit worthiness.

This information provided above is to the best of my knowledge, and belief, true and correct. I warrant that I have read the terms and conditions of this proposal and have the authority to sign it.
Signed for and on behalf of:

Name:

Title:

Signature (Director, General Manager or Partner only):

Date:

New Zealand Travel Agent Application for Credit Account

ABN 360 906 709 65



SERVICE AGREEMENT

ACCOUNTS

You should check:

- with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions;
- your account details which you have provided us are correct by checking them against a recent account statement; and
- with your financial institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.

CONFIDENTIALITY

We will keep any information (including your account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.

We will only disclose information we have about you:

- to the extent specifically required by law; or
- for the purpose of the Agreement (including disclosing information in connection with any query or claim).

NOTICE

If you wish to notify us in writing about anything relating to this Agreement you should write to:

Virgin Australia Airlines
Attention Accounts Department
PO Box 1034
Spring Hill QLD 4004

accounts@virginaustralia.com

We will notify you by sending a notice in the ordinary post to the address you have given us in the Direct Debit Request.

Any notice will be deemed to have been received two business days after it is posted.



Direct Debit Authority

Name of my account to be debited (acceptor) <input type="text"/>				Initiator's Authorisation Code <table border="1"><tr><td>0</td><td>1</td><td>3</td><td>3</td><td>8</td><td>5</td><td>5</td></tr></table>						0	1	3	3	8	5	5							
0	1	3	3	8	5	5																	
Name of my bank: <input type="text"/>																							
<table border="1"><tr><td>0</td><td>0</td></tr></table> Bank	0	0	<table border="1"><tr><td>0</td><td>0</td><td>0</td><td>0</td></tr></table> Branch	0	0	0	0	<table border="1"><tr><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table> Account	0	0	0	0	0	0	0	0	<table border="1"><tr><td>0</td><td>0</td></tr></table> Suffix	0	0	Approved _____ nnnn mm/yy			
0	0																						
0	0	0	0																				
0	0	0	0	0	0	0	0																
0	0																						

From the acceptor to _____ *[insert name of acceptor's bank]* (my bank):

I authorise you to debit my account with the amounts of direct debits from **Virgin Australia Airlines Pty Ltd** with the authorisation code specified on this authority in accordance with this authority until further notice.

I agree that this authority is subject to:

- The bank's terms and conditions that relate to my account, and
- The specific terms and conditions listed below.

Please include the following information on my bank statement:

Statement number

Authorised signature/s: _____	Date: ____ / ____ / ____
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Specific conditions relating to notices and disputes

I may ask my bank to reverse a direct debit up to 120 calendar days after the debit if:

- I don't receive a written notice of the amount and date of each direct debit from the initiator, or
- I receive a written notice but the amount or the date of debiting is different from the amount or the date specified on the notice.

The initiator is required to give you a written notice of the amount and date of each direct debit no less than 2 business days before the date of the debit.

If the bank dishonours a direct debit but the initiator sends the direct debit again within 5 business days of the dishonour, the initiator is not required to give you a second notice of the amount and date of the direct debit.