

PARAMOUNT COMMERCE

NEW DIRECTOR/SIGNATORY UPDATE FORM

Please complete the following information and have it authorized by an officer or director of the company.

Effective date of new Director/Signatory:

Please tick which products the company is currently using, as the changes will take effect on all of them.

INSTADEBIT

iDebit

White-label INSTADEBIT

Pay-outs

Instant Banking

1. COMPANY INFORMATION

Company Name:
Legal Name

Physical Address:
(No PO Boxes)

City:

Post Code:

Country:

Phone Number: ()
(Including country/area code)

Fax: ()
(Including country/area code)

Corporate Website:

2. NEW DIRECTOR/SIGNATORY INFORMATION

Name:

Title / Role:

Percentage Ownership:

Home Address:

City:

State / Province:

Country:

ZIP / Postal Code:

Date of Birth:

Passport No./ SIN / SSN / Citizen ID:

Please attach a clear copy of a valid passport to this Update form.

Have you ever been convicted of a criminal offence, or do you currently have charges pending against you?

☐ No

☐ Yes – please provide details –

The applicant hereby agrees to notify IISL/CMT of any material change in the information provided herein.

By signing below, the Primary Executive declares the information included in this document is completely correct and accurate.

Primary Executive Name

Title / Role

Authorized Signature

Date

3. MERCHANT APPROVAL

By signing below, Merchant authorizes Instadebit International Solutions Ltd and/or Citadel Commerce (Malta) Limited ("IISL/CMT") to revise the contact information contained in the Merchant Application Form (completed as part of the contracting process) and replace it with the information contained herein. The new contact or contacts listed above will be authorized to perform the duties and access information relevant to their roles as specified above. This includes access to account information, passwords or technical details. The Merchant indemnifies and holds IISL/CMT and its officers, employees, directors, agents, successors and assigns harmless from any and all damages, losses, costs and expenses, including without limitation reasonable attorneys fees, related to any errors in the contact provided by the merchant in this Contact Change Authorization..

Merchant hereby authorizes IISL/CMT and its designated agents and representatives to provide new account details to the contact listed above. This authority will remain in effect until IISL/CMT receives information otherwise from the Merchant.

(NOTE: This amendment to the Merchant Application must be signed by an authorized officer of the company that has contracted with IISL/CMT)

I hereby authorize the New Director/Signatory Update form information as contained herein and certify that I have authority to make this revision and that I have authority to bind the corporation in contract:

Merchant Authorized Signature

Date

Print Name

Title

4. MAILING INSTRUCTIONS

Email the completed signed and dated form to merchantacceptance@paramountcommerce.com

For Internal Use

Approved By: _____

Date: _____