



## Change of Business Ownership

### Supplier of Payments Solutions:

*Consisting of Payments Services and / or Payment Acceptance Hardware as the case may be*

**DIRECT PAYMENT SOLUTIONS LIMITED**, a company incorporated in New Zealand, 98 Anzac Avenue, Central Auckland (PO Box 8400, Symonds Street, Auckland 1150) ("**DPS**")

### Customer of DPS:

\_\_\_\_\_

### Date of Ownership Transfer:

\_\_\_/\_\_\_/\_\_\_

By submitting this Request for Change of Business Ownership, the Outgoing Customer identified on this document acknowledges and agrees that it is transferring and assigning its rights to the incoming customer with regards to all Payment Gateway Services and other contracts, products and services associated with and billed by DPS to the Outgoing Customer, and that DPS may do the following (which are referred to in this form as the "Changes"):

- ▶ Disclose details of account, technical, fiscal or other, to the Incoming Customer,
- ▶ Assign the exclusive use of all Payment Gateway Services to the Incoming Customer on or about the date requested above.

If DPS is unable to make the Changes on the date requested above for any reason caused by either the Outgoing Customer or the Incoming Customer, the Outgoing Customer instructs DPS to either:

- ▶ Disconnect or discontinue on the date requested above all products and services associated with the account in question and issue to the Outgoing Customer final billing for the account, including any applicable termination charges; or
- ▶ Continue all products and services associated with the account with the result that the Outgoing Customer will remain DPS' customer with respect to the Payment Gateway Services and will continue to be liable for all associated charges.

### OUTGOING CUSTOMER:

**Please review all terms and conditions on all pages of this form and, if acceptable:**

- ▶ Complete and sign below;
- ▶ Present form to the Incoming Customer listed below and obtain authorized signature of the Incoming Customer;
- ▶ Return the completed form to DPS at least 5 business days prior to the date requested above.

### INCOMING CUSTOMER:

**Please review all terms and conditions on both pages of this form and, if acceptable:**

- ▶ Complete and sign below.

**FAILURE to return this form properly completed to DPS at least 5 business days prior to the "Requested Date of Change" will result in the Outgoing Customer remaining as DPS' customer with respect to the Payment Gateway Services and with continued liability for all associated charges.**



## Change of Business Ownership

<b>INCOMING CUSTOMER</b>		
New Company Trading Name:		
New Company Legal Name:		
Authorized Company Signature: (Signature of person authorized to sign on behalf of Incoming Customer)		
Name of Signee (print):		
Name of new management contact:	Name of new accounts contact:	Name of new technical contact:
Title:	Title:	Title:
Phone:	Phone:	Phone:
Email:	Email:	Email:
New Merchant Facility Details:		
For confirmation of your specific requirements please see <a href="http://www.paymentexpress.com/Knowledge_Base/Bank_Guides/New_Zealand">www.paymentexpress.com/Knowledge_Base/Bank_Guides/New_Zealand</a>		
Date:		
Postal Address:		
Physical Address:		



<b>OUTGOING CUSTOMER</b>
Old Company Trading Name:
Old Company Legal Name:
Authorized Company Signature:  (Signature of person authorized to sign on behalf of Outgoing Customer)
Name of Signee (print):
Title:
Phone:
Email:
Date:

#### NOTE TO OUTGOING CUSTOMER

Once the Change of Business Ownership takes place, the Outgoing Customer is responsible for the following where applicable:

- ▶ Cancel pre-authorized payment arrangements;
- ▶ Provide all necessary information (e.g.: user name, ID, password) to enable the Incoming Customer access to and use of all products and services associated with the Payment Gateway Services

Contact Payment Express on 0800 729 6368 or +64 9 309 4693 to speak with a representative regarding your Change of Business Ownership request.

RETURN COMPLETED FORM TO: [sales@paymentexpress.com](mailto:sales@paymentexpress.com)