# The American Express Business Credit Card

Fatwa Reference Number for Charge Cards: AMX-359-01-01-08-15 Fatwa Reference number for The American Express Business Card: AMX-359-01-01-08-15-05 American Express VAT Registration Number: 300000606800003

January 2023

# Application form for Supplementary Business Card(s)

Last 4 Digits of Main Account Card	IMPORTANT sales agent to contact you and sched an appointment to verify your Applica
Main Account Holder's ID number	Please enclose a copy of the Supplementary applicant's passport and ID/Igama.
Name of the American Express Cardmember authorising the issuance of	Supplementary applicants should be 15 years of age and above.     Please complete all fields using BLOC CAPITALS in blue or black ink.
Supplementary Card(s)	<ul> <li>Submit the Application with the required documents to one of our offices (Riyadh, Jeddah or Khobar), or request a direct</li> <li>Please note that we cannot guarantee processing of this application if any section is not completed correctly.</li> </ul>
First applicant	Second applicant
Please spell out your name in English as it appears in your passport and as you would like it to appear on your Card using no more than 26 letters and spaces. Note that a fee will be charged f the Card needs to be replaced due to an incorrect name provided below:	Please spell out your name in English as it appears in your passport and as you would lik appear on your Card using no more than 26 letters and spaces. Note that a fee will be ch if the Card needs to be replaced due to an incorrect name provided below:
Mr Mrs Miss Dr Other	Mr Mrs Miss Dr Other
What is your purpose of using the Card? Personal Purchases Travel Cash Withdrawal All Family Name	What is your purpose of using the Card? Personal Purchases Travel Cash Withdrawal All Family Name
First Name	First Name
Middle Name	Middle Name
Date of Birth D D M M Y Y Y Y	Date of Birth D D M M Y Y Y Y
Place of Birth	Place of Birth
Relationship Nationality	Relationship Nationality
Passport No.	Passport No.
Dther Nationality	Other Nationality
Passport No.	Passport No.
D or Iqama No.	ID or Iqama No.
Are you a person with a disability? Yes No	Are you a person with a disability? Yes No
yes, please provide accredited medical reports or supporting documents.	If yes, please provide accredited medical reports or supporting documents. Mobile No.
Nobile No. Email address (Mandatory)	Email address (Mandatory)
imployer or Company Name	Employer or Company Name
IOME ADDRESS (NATIONAL ADDRESS)*	HOME ADDRESS (NATIONAL ADDRESS)*
Building No. Street Name	Building No. Street Name
District City	District City
IP Code Additional Number Unit No	ZIP Code Additional Number Unit No
National address is mandatory in order to process the application. Iarketing Communications preference (Tick One) SMS E-mail Both None	* National address is mandatory in order to process the application. Marketing Communications preference (Tick One) SMS E-mail Both None
have read and understood the Cardmember Agreement at www.americanexpress.com.sa/termsandconditions and agree to be bound by the ame. By signing below. I certify that I agree to the Terms and Conditions governing the Card and to receiving the Initial Disclosure Statement, roduct Summary and Consumer Protection Principles electronically.	I have read and understood the Cardmember Agreement at www.americanexpress.com.sa/termsandconditions and agree to be be same. By signing below. Levitly that Lagree to the Terms and Conditions governing the Card and to receiving the initial Disclosure Product Summary and Consumer Protection Principles electronically.
X	SIGNATURE OF SUPPLEMENTARY APPLICANT
SIGNATURE DATE OF SIGNATURE	X
X         DATE OF SIGNATURE           Find applicant         Please spell out your name in English as it appears in your passport and as you would like it to ppear on your Card using no more than 26 letters and spaces. Note that a fee will be charged if the Card needs to be replaced due to an incorrect name provided below:	X SIGNATURE DATE OF SIGNAT
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Ar Mrs Miss Dr Other Mar Dr Other Mar Mrs Miss Dr Mi	X       DATE OF SIGNAT         Fourth applicant       Please spell out your name in English as it appears in your passport and as you would I appear on your Card using no more than 26 letters and spaces. Note that a fee will be or if the Card needs to be replaced due to an incorrect name provided below:         Mr       Mrs       Miss       Dr       Other         What is your purpose of using the Card? Personal Purchases       Travel       Cash Withdrawal       All         Family Name       First Name       Middle Name       Date of Birth       D       M M       Y Y Y       Place of Birth         Relationship       Nationality       Passport No.       Other Nationality       Different card       Different card
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Third applicant         Please spell out your name in English as it appears in your passport and as you would like it to appear on your Card using no more than 26 letters and spaces. Note that a fee will be charged f the Card needs to be replaced due to an incorrect name provided below:         Mr       Mrs       Miss       Dr       Other         What is your purpose of using the Card? Personal Purchases       Travel       Cash Withdrawal       All         Family Name	X       DATE OF SIGNAT         Fourth applicant       Please spell out your name in English as it appears in your passport and as you would liappear on your Card using no more than 26 letters and spaces. Note that a fee will be or if the Card needs to be replaced due to an incorrect name provided below:         Mr       Mrs       Miss       Dr       Other         What is your purpose of using the Card? Personal Purchases       Travel       Cash Withdrawal       All         Family Name       First Name       Middle Name       Date of Birth       Date of Birth       Date of Birth         Passport No.       Dirther Nationality       Passport No.       Dirther Nationality       Passport No.         Dor I qama No.       Are you a person with a disability? Yes No       If yes, please provide accredited medical reports or supporting documents.       Mobile No.         Email address (Mandatory)       Employer or Company Name       HORE ADDRESS (NATIONAL ADDRESS)*       Building No.       Street Name         District       City       ZIP Code       Additional None       More       More
No.       Description         Other       Image: Section 1000 (Section 1000) (Section 10000) (Section 100000) (Section 10000) (Section 10000) (Section 10000) (	X       DATE OF SIGNAT         Fourth applicant       Please spell out your name in English as it appears in your passport and as you would liappear on your Card using no more than 26 letters and spaces. Note that a fee will be or if the Card needs to be replaced due to an incorrect name provided below:         Mr       Mrs       Miss       Dr       Other         What is your purpose of using the Card? Personal Purchases       Travel       Cash Withdrawal       All         Family Name       First Name       Middle Name       Date of Birth       Date of Birth       Date of Birth         Passport No.       Dirther Nationality       Passport No.       Dirther Nationality       Passport No.         Dor I qama No.       Are you a person with a disability? Yes No       If yes, please provide accredited medical reports or supporting documents.       Mobile No.         Email address (Mandatory)       Employer or Company Name       HORE ADDRESS (NATIONAL ADDRESS)*       Building No.       Street Name         District       City       ZIP Code       Additional None       More       More
Action     Ar   Mrs   Miss   Dr   Other     And is your purpose of using no more than 26 letters and spaces. Note that a fee will be charged it the Card needs to be replaced due to an incorrect name provided below:      Ar   Mrs   Miss   Dr   Other     Anality Name   Middle Name   Middle Name   Middle Name   Mate is your purpose of using the Card? Personal Purchases   Travel   Cash Withdrawal   All     amily Name   Middle Name   Middle Name   Mate of Birth   Det of Birth   Date of Birth   Bassport No.   Other Nationality   Passport No.   Dor I qama No.   Very ou a person with a disability?   Yes   Very ou a person with a disability?   Yes   Nobile No.   Street Name   ONE ADDRESS (NATIONAL ADDRESS)*   Building No.   Street Name   District   City   UP Code   Additional Number   Unit No    Partent and understood the Cardmenter Agreement at www.americanegarcers.adverma.adverment.	XIGNATURE       DATE OF SIGNATION         Fourth applicant       Please spell out your name in English as it appears in your passport and as you would it appear on your Card using no more than 26 letters and spaces. Note that a fee will be or if the Card needs to be replaced due to an incorrect name provided below:         Mr       Mrs       Miss       Dr       Other         What is your purpose of using the Card? Personal Purchases       Travel       Cash Withdrawal       All         First Name       Middle Name       Middle Name       Middle Name       Middle Name         Date of Birth       MMYYYY       Place of Birth       MMYYYY       Place of Birth       Middle Name         Passport No.       Middle Name       Middle Name       Middle Name       Middle Name       Middle Name         Pastor Birth       MMYYYY       Place of Birth       Middle Name       Middle Name       Middle Name         Date of Birth       MMYYYY       Place of Birth       Middle Name       Middle Name       Middle Name         Date of Birth       Middle Name       Middle Name       Middle Name       Middle Name       Middle Name         Date of Birth       Middle Name       Middle Name       Middle Name       Middle Name       Middle Name         Date of Birth       Middle Name       Middle Name       Middle Name
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This Application is made up on two (2) pages and by signing the first page of this application, I/we understand that I/we irrevocably and unconditionally waive the requirement to place my/our initials on every page of this application. SIGNATURE OF MAIN CARDMEMBER AUTHORISING ISSUANCE OF SUPPLEMENTARY CARD(S)

Х SIGNATURE

# **Initial Disclosure Statement**

### Please read the following important information carefully prior to using the Card(s). American Express Saudi Arabia - The American Express Business Credit Card Declaration

**Declaration** You (the Applicant whose Name is mentioned below and hereinafter referred to as "You" or "Your") undertake to pay American Express (hereinafter referred to as "We", "Our" or "Us") all amounts failing due from You, by the Payment Due Date, as a result of membership in or use of the Card(s) as shown on each monthly Statement from Us, which constitutes due notice that such amounts have become due and payable. The microfilm copies of the Card(s) as shown on each monthly Statement from Us, which constitutes due notice that such amounts have become due and payable. The microfilm copies of receipts sent to You by Us evidencing the amount due from You consequent upon Your use of the Card(s) shall be conclusive evidence of Your indebtedness. You hereby waive the right of objection threato and agree to deeming aid microfilms as original receipts. Your domicile and residence is shown in the application and You hereby irrevocably submit to the non-exclusive jurisdiction of the competent courts or other bodies in Your country of the Saudi Central Bank (SAMA), in all respects in relation to Your obligations to Us and undertake to comply with decisions and judgements and orders made thereby providing for payments to gether with fees, expenses and altorney's fees. You further affirm that You fully understand that You may be subject to criminal liability in the event that any other source either before or at any time after the application is processed to obtain any information required, You undertake the advect and you four authorized representatives to contact Your bur bank guarantee in a format acceptable to Us, which we may enforce in the event of non-payment or default as a condition for approving Your application and You further understand that Yer reserve the right to require a bank guarantee in a format acceptable to Us, which we may enforce in the event of non-payment or default as a condition for approving Your application. Any Supplementary Card applicant tha mort of non-payment or default as a condition

You hereby agree to provide Us with any information that We require including but not limited to Know Your Customer forms for establishing and/or administering Your Accounts and facilities with Us and update Your personal information if there are any changes and as may be requested by Us. You also authorize Us to obtain and collect information as deemed necessary in regard to You, Your accounts and facilities with Us and update Your Personal information in the Saudi Credit Bureau ("SIMAH") and electronically through AL Elm Information Security Company ("Elm") and to disclose Your information to SIMAH, Elm and to Our authorized collection agencies or to any other agency approved by SAMA. All capitalized terms in this document will have the same meaning as defined in the Cardmember Agreement. Upon its approval by Us, You application and all supporting documents shall constitute integral parts of the Cardmember Agreement and will remain Our property even if Your application is declined or if You close Your Card Accounts with Us.

# The American Express Business Credit Card Information Table

The American Express Dusiness Creat Gara mornation fable						
Annual Fee‡	SAR 450 or US\$ 120	Supplementary Card Fee‡	SAR 225 or US\$ 60			
Murabaha Margin*	2.5%	Collection Fee**,‡	SAR 150 or US\$ 40 per month for Accounts with payments overdue for 3 months or more			
Cash Withdrawal Fee (per Transaction)‡	SAR 75 or US\$ 20	Foreign Exchange Conversion Fee‡	2.75%			
Cheque Returned Fee‡	SAR 150 or US\$ 40	Statement Request Fee (more than three months)‡	SAR 40 or US\$ 10 (per Statement)			
Refund of Credit Balance Fee‡	SAR 100 or US\$ 27	Direct Debit Rejection Fee‡	SAR 150 or US\$ 40			
Dispute Handling Fee (for invalid disputes only)	SAR 50 or US\$ 13	Overseas Payment Fee‡	SAR 375 or US\$ 100			
Card Replacement Fee for Incorrect Embossing Name provided by the Cardmember or For Lost / Stolen Cards‡	SAR 100 or US\$ 27	Membership Rewards Program Fee (optional)***,‡	First year free, SAR 93.75 or US\$ 25 from year 2 onwards			

The Card is a Sharia compliant Tawarruq based product. Although You will not be charged interest, You will be required to pay a Murabaha Margin of 2.5% per month as mentioned in the table above. In addition to the Murabaha Margin . We may charge You a Collection Fee at the rate specified in Annex "A" of the Cardmember Agreement if Your Card is overdue for three (3) months or more.

The Collection Fee is made to discourage delayed payment. This entire fee will be distributed to charity under the supervision of Our Sharia Board. \*\*

\*\*\* The Membership Rewards Program is an optional feature and can be cancelled at anytime by informing Our customer service agents

Value Added Tax ("VAT") will be levied as per the prevailing tax laws in addition to the fee mentioned above

# The Most Prominent Provisions of the Cardmember Agreement

e Most Prominent Provisions of the Cardmember Agreement All Transactions including Cash Withdrawals, incurred in currencies other than the billing currency of the Card Account ("Non-Billing Currency"), will be converted into the Card Accounts billing currency ("Billing Currency"). Unless the applicable laws require a specific conversion rate, the Global Network, will use conversion rates based on interbank rates, which they select from customary industry sources on the business day prior to the date of processing the Transaction. A Foreign Exchange Conversion Fee, as shown in the table above or as amended by Us from time to time, will be added to the converted amount by Us, the Issuer of Your Card. The conversion will be made on the date of processing the Transaction, which may not be the same date when the Transaction was made since this depends on the time when the Transaction was submitted to Global Network. The conversion rates may also vary accordingly. At the converted to US Dollars before being converted to the Billing Currency. Amounts converted by independent third parties are billed as converted by them. An illustrative example is given below.

Description	Purchase Transaction*	Cash Transaction*
Transaction Value	EUR 100	EUR 100
Assumed EUR / US\$ Exchange Rate	EUR 1 = US\$ 1.05	EUR 1 = US\$ 1.05
US\$ Equivalent	US\$ 105	US\$ 105
Foreign Exchange Conversion Fee @ 2.75%	US\$ 2.89	US\$ 2.89
Total Transaction Value in US\$	US\$ 107.89	US\$ 107.89
Assumed US\$ / SAR Exchange Rate	US\$1 = SAR 3.75	US\$1 = SAR 3.75
Total Transaction Value in SAR	SAR 404.59	SAR 404.59
Cash Advance Fee (Billed Separately on Your Statement)	Not Applicable	SAR 75.00 or US\$ 20
Total Transaction Value including Cash Advance Fee	Not Applicable	SAR 479.59 or US\$ 127.89

The illustration above excludes VAT

B. A regular monthly Statement of Account will be sent via e-mail to Your personal e-mail address provided in the application form. If no email address is provided, a printed Statement will be sent to either personal or business address. Each Statement will show the Current Balance You need to pay Us. You are required to pay in full, every month, by the Payment Due Date.

The Business Card is a revolve and Sharia compliant Tawarrug based product. You will be required to pay a Murabaha Margin when settling the unpaid portion of Your Statement Current Balance after the Payment Due Date, through sales proceeds of a Tawarrug transaction. Please note that You are required to settle at least the Minimum Amount Due (25%) of the monthly statement balance by the Payment Due Date shown on the Statement. However, by making only the minimum payments on the Account rather than the full Current Balance amount, You will also be required to pay a Murabaha Margin as set forth in Annex "A" of the Cardimember Agreement on any unpaid portion of the Current Balance shown on the Statement as of the Payment Due Date. Making only Minimum Payments on Your Credit Card may result

in You taking a prolonged period of time to repay your amounts owed to Us in full and paying Us substantially more than the value of Transactions performed on Your Business Card Statement. For information on our credit advisory services please visit www.americanexpress.com.sa/creditadvisory

- Death Or Bankruptcy: For contracts signed before October 1, 2018: In the unfortunate event of Your death, We shall have the right to ask Your legal heirs to pay amounts due
  on Your Account immediately
  In case of Your bankruptcy, all amounts due on Your Account shall become payable immediately
  If You lose or give up Your residency status in the Kingdom of Saudi Arabia or leave the Kingdom of Saudi Arabia permanently. We have the right to cancel Your Card and close Your Account.
  For contracts signed on or after October 1, 2018: In the unfortunate event of Your death or total disability you will be discharged from your liability for any
  amount due to Us except if Your death or disability was caused by:
  Any deliberate attempt on Your part to injure Yourself or attempt to commit suicide, whether mentally
  same or insane at that time.
  Natural disasters.
  - Decision of courts or competent judicial authorities under the applicable laws in the Kingdom of Saudi Arabia.

Decision of courts or competent judicial authorities under the applicable laws in the Ninguorn of Saudi Arabia.
 Drinking alcohol, taking drugs or illegal medicines.
 Participating in or training for any dangerous sports or competition, such as the horse racing or car races.
 Nature of Your work.
 Anything that results or is caused or contributed by nuclear weapons or nuclear radiations or radioactive pollution from any nuclear fuel or wastes arising from the combustion of nuclear fuel, war, invasion or foreign aggression acts or aggression acts or semi war acts, and ravage or terrorist acts committed by a person or persons working individually or on behalf or relation to any terrorist organization.
 In case of Your bankruptcy, all amounts due on Your Account shall become payable immediately if You lose or give up Your residency status in the Kingdom of Saudi Arabia or leave the Kingdom of Saudi Arabia permanently. We have the right to cancel Your Card and close Your Account.
 C. A grace period of up to 25 days will be granted to settle the amount, and the Payment Due Date will be indicated on Your Account may be suspended until payment is received.
 We provide credit information relating to You to SIMAH on a periodic basis. The information provided reflects the status as of the most recent Statement and includes information regaring whether the Card Account is regular or overdue. To avoid any adverse credit history with SIMAH, You should ensure that You notice an "account statement error/disputed Transaction", You must inform Us through authenticated means of communication immediately and in any event, not later than one month after the statures of communication immediately and in any event, not later than one month after the status are of your statement error/disputed Transaction", You must inform Us through authenticated means of communication immediately and in any event, not later than one month after the state

additional data for count statement error/disputed Transaction reans any Transaction posted to Your Account, resulting in an error in the overall balance.
We may offer to provide You with protection cover during the validity of the Cardmember Agreement. Where We offer protection cover as an additional feature of Our services to You, We shall disclose to you the details of such protection cover as an additional feature of Our services to You, We shall disclose to you the details of such protection cover as an additional feature of Our services to You, We shall disclose to you the details of such protection cover, including the process of identifying beneficiaries and for distributing compensation amongst beneficiaries. For the Protection Terms & Conditions, please visit www. americanexpress.com.sa/termsandconditions.
D. All Cash Withdrawal Transactions attract a Cash Withdrawal Fee at the rate shown in the table above. This Fee will be charged and billed to Your Card / Additional Cards without notice from Us
ii. Cancellation / supersion of Your Card / Additional Cards without notice from Us
iii. Decrease in Your Credit Limits without notice from Us
iii. Negative impact on Your credit bureau record and Your ability to obtain new credit facilities
v. Litigation in the event of non-payment of Your dues
v. Increased financial burden on You due to Fees and Charges
vi. Financial losses to You due to unauthorized Transactions due to Your failure to report loss / theft of Your Card / Additional Cards

- Card promptly

### F. Ending the Agreement:

- You may terminate this Agreement at any time by returning all Your Cards to Us and notifying Us by any authenticated communication mean requesting to terminate this Agreement. The termination of this Agreement will be effective when We receive all Cards cut in half and You have paid off all amounts You owe Us. You can cancel a Card issued to a Supplementary Cardmember, by informing us via means of authenticated communication. You will continue to be liable for all Transactions performed by the Supplementary Cardmember until We receive the Card cut in half
- We reserve the right to terminate this Agreement at any time by giving immediate notice. Alternatively, we shall restrict Your Card from being used, if this Agreement is terminated, and You must settle all outstanding amounts due on the Account including Transactions in progress and Cash Withdrawals that have been authorized but not yet debited to the Account".
- Unless clause 13(b) of the Cardmember Agreement applies, You will still be responsible for all Transactions or Unauthorized Transactions that take place in relation to Your Account iii
- You have the right to cancel the agreement, without incurring any charges, within 10 days of receiving the Card unless You have activated the Card G. Complaints / Feedback

We have established procedures for You to provide Us with feedback or bring a concern to our attention by following the Complaint / Feedback procedures outlined below:

## Step 1:

If You should have any feedback or complaint, our Customer Service staff is trained and equipped to handle Your inquiry and can be reached through any of the following channels: Email: complaints@americanexpress.com.sa

Telephone Number: +966-11- 292 6663

We can also assist you at American Express Saudi Arabia offices located in Riyadh, Jeddah and Dhahran.

# Step 2:

If your concern is not resolved to Your satisfaction, you may write to Our Head of Customer Complaints at the following email address:

Complaintsmanager@americanexpress.com.sa

Alternatively, you can send a letter to the following address:

Attn: Head of Customer Complaints

American Express Saudi Arabia

P.O. Box 6624 Riyadh 11452

# Step 3:

If Your issue is still not resolved, you may report Your concern to the regulator- SAMA through SAMACares

We guarantee that Your query is acknowledged and investigated in a timely manner and We will forward Your concern to the appropriate department for investigation and response. We will provide a response detailing Your concern and the appropriate resolution or explanation within 10 business days. In the event that We are unable to resolve Your complaint within that time period, an update will be provided to You estimating the completion date of the investigation.

The Business Cardmember is liable for all charges incurred on the Business Card issued to him/her and on any Supplementary Business Card issued on his/her account. The Supplementary Business Cardmember is only and severely liable with the Main Business Cardmember for all charges incurred on the Supplementary Business Cardmember issued to them. In the event of cancellation of the Supplementary Business Card the Main Business Cardmember is liable for settlement of all charges incurred by the Supplementary Business Cardmember written request via means of authenticated communication accompanied by the Supplementary Business Card cut in half.

Additional Information						
Marketing Communications preference (Tick One)	SMS	🗌 E-mail	Both	□ None		
CUSTOMER SERVICE CONTACT DETAILS						
Corporate and Business Cards: 800 440 0004 Outside KSA: +966 11 292 6661						

Website: www.americanexpress.com.sa