REFERRAL LEAD SOURCE	
SETTLEMENT BANK AUTHORIZATION NETWORK SETTLEMENT NETWORK	
BMO HARRIS BANK N.A. VITAL	
OFFICE NAME OFFICE PHONE APPLICATION ID	
APPLICATION DATE CONTRACTOR NAME ASSOCIATION	
BUSINESS INFORMATION	
CLIENT'S LEGAL or CORPORATE NAME (MUST CORRESPOND WITH IRS FILING NAME) CLIENT'S BUSINESS NAME (DOING BUSINESS AS)	
MAILING / BILLING ADDRESS LOCATION ADDDRESS (IF DIFFERENT THAN MAILING / BILLING	G)
CITY, STATE, ZIP CODE (+4)	
PRIMARY CONTACT NAME PRIMARY CONTACT PHONE LOCATION PHONE LOCATION	FAX
PRIMARY EMAIL ADDRESS (ALL MERCHANTS REQUIRED TO PROVIDE A VALID EMAIL ADDRESS) BUSINESS WEBSITE ADDRESS	
DATE BUSINESS STARTED LENGTH OF CURRENT OWNERSHIP CUSTOMER SERVICE PHONE	
D & B EXISTING MID (IF APPLICABLE) NUMBER OF LOCATIONS STORE NU	MBER
TAX INFORMATION FAILURE TO PROVIDE ACCURATE INFORMATION MAY RESULT IN A WITHHOLDING OF MERCHANT FUNDING PER IRS REGULATIONS (REFER TO SE	CTION 6.05 OF TERMS AND CONDITIONS)
NAME (as it appears on your Federal Income Tax Return) FEDERAL TAX ID (as it appears on your Federal Income Tax ID)	
□ ASSOCIATION / ESTATE / TRUST □ CORPORATION – CHAPTER S, C □ INTERNATIONAL ORGAN	NIZATION
	CATION FILED:
☐ LIMITED LIABILITY COMPANY STATE FILED: ☐ MEDICAL OR LEGAL CORPORATION STATE FILED: ☐ PARTNERSHIP	STATE FILED:
□TAX EXEMPT ORGANIZATION (501c) □ GOVERNMENT (FEDERAL, STATE, LOCAL) □ INDIVIDUAL / SOLE PROF	
STATE FILED: STATE FILED:	STATE FILED:
☐ I CERTIFY THAT I AM A FOREIGN ENTITY / NON-RESIDENT ALIEN (IF CHECKED, PLEASE ATTACH IRS FORM W-8)	
☑ I CERTIFY THAT I AM PROVIDING AUTHORIZATION FOR THE ELECTRONIC ISSUANCE OF IRS FORM 1099	
OWNER(S) / OFFICER(S) and TRADE REFERENCE	
OWNER / OFFICER 1	
FULL NAME FULL NAME FULL NAME	
TITLE	
ADDRESS ADDRESS ADDRESS	
CITY, STATE, ZIP CODE (+4) CITY, STATE, ZIP CODE (+4) CITY, STATE, ZIP CODE (+4)	+4)
PHONE FAX PHONE PHONE	FAX
EMAIL EMAIL	
SSN DOB SSN DOB	
DATE OF OWNERSHIP DATE OF OWNERSHIP	
GENERAL UNDERWRITING PROFILE	
BUSINESS TYPE SEASONAL HIGH VOLUME MONTHS (CIRCLE ALL THAT AF	DDI V
	A S O N D
	TIL PRODUCT DELIVERY
CREDIT CARD UNDERWRITING PROFILE	
MONTHLY VOLUME AVERAGE TICKET HIGHEST TICKET DISCOUNT	PAID
	AILY MONTHLY
CURRENT PROCESSOR CURRENT PROCESSOR PHONE	
METHOD OF SALES (TOTAL MUST = 100%) % OF PRODUCTS SOLD (TOTAL	AL MUST = 100%)
CARD PRESENT SWIPED OL OL OL OL OL OL OL OL OL O	GOVERNMENT SALES

sage

PLEASE	EXPLAIN Y	STIONNAIRE OUR BILLING / DELI UP FRONT WITH			PRODUCT	/ SERVICE	DELIVERY.			
□ PA	RTIAL PAYME	ENT REQUIRED UP FRO	ONT WITH		% AND			FINAL PRODUCT / SEF	RVICE DELIVERY.	
☐ PA	YMENT RECE	EIVED AFTER PRODUCT	/ SERVICE	IS PROV	/IDED.					
	OUCT / SER\	ICE DELIVERY REC			G BILLING SEMI – ANNI		EXPLAIN AVAILABL ANNUALLY	E BILLING OPTIONS	S:	
THORIZAT	TION TO	ACH (CHECKING ACCOL	JNTS ONLY. MU	ST INCLU	DE VOIDED BI	USINESS CHEC	K FOR EACH ACCOUNT)			
BANK NAM	ME							CITY, STATE		
DEPOSITO Merchant's ba		put into this account.		ROUT	ING #			ACCOUNT #		
FEES		and the second second	Mala a sassina	ROUT	ING #			ACCOUNT #		
		ssary charges will be taken from	this account.							
EDIT CAR	RD INTER	CHANGE								
					QUALIF	ICATIONS	(if applicable) RATE	1 PLUS		
<u>ACCEPT</u>		CARD TYPE	RATE				RATE 2	RATE 3	<u>INTL / NS</u>	<u>BUSINESS</u>
YES ■		VISA®		%	☐ CP		%+\$	<u> </u>	<u> </u>	<u> </u>
YES ■ YES		MASTERCARD®		%	☐ CP	☐ IPT	<u> </u>	%+\$	<u> </u>	<u> </u>
YES ■ YES		DISCOVER®		%	☐ CP		%+\$	<u> </u>	<u></u> % + \$	<u> </u>
☐ YES	□ NO	PIN DEBIT		%	☐ DCP	☐ DPT				
☐ FANF	CP / CNP	(VARIES) *								
* BASED ON	PRIOR MONTH'S	VISA® CNP VOLUME, NUMBER	OF LOCATIONS I	PROCESSIN	G VISA® AND 1	TAX ID. FOR FUI	RTHER INFORMATION ON FAN	F AND MSP NETWORK FEE, PL	EASE GO TO WWW.MERCHAN	TNETWORKFEE.COM
HER ENTI	ITLEMEN	rs .								
CARD TYP	<u>PE</u>		REQUES	<u>ST</u>			EXISTIN	G ACCOUNT		
AMERICA	N EXPRESS	®								
EBT FBS										
ICING INF	ORMATIC	DN								
		I PRICING		DI	ER ITEM	CCC	START UP PRI	CING		AMOUNT
				F		FEE	START OF FRE	CING		
VISA® / I	MASTERCAF	D®			\$		APPLICATION CRED	IT		\$
	R® (JCB)				\$		EQUIPMENT			\$
AMERICA	N EXPRESS	®			\$		WIRELESS SET UP			\$
ARU					\$		TELETRAINING - PH			\$
EBT					\$		TELETRAINING - VIR			\$
	IT PER ITEM				\$		LEASE / RENTAL DE	POSIT		\$
VOICE AL	UTHORIZATI	ON			\$		EXPEDITE			\$
							INJECTION			\$
							SAGE MOBILE PAYI			\$
							SAGE MOBILE ADD	-ON SET UP (PER LINE)		\$
RECUR	RRING FE	ES			AMOUN	١T	RECURRING FI	EES		AMOUNT
MONTHLY	Y STATEMEN	NT			\$		ANNUAL ASSESSME	ENT		\$
MONTHLY	Y SUPPORT				\$		VISA® DATA INTEG	RITY FEE		\$ 0.10
MONTHLY	Y MINIMUM				\$		CHARGEBACK (PER	OCCURRENCE)		\$
MONTHLY	Y GATEWAY	ACCESS			\$		SIGNATURE RATE (VISA® / MASTERCARE	O®)	%
MONTHLY	Y DEBIT AC	CESS			\$		ASSESSMENTS (VIS	A® / MASTERCARD®)		0.110 %
MONTHLY	Y WIRELESS	ACCESS			\$		ASSESSMENTS (LAF	RGE TICKET) (\$1K AND A	BOVE) (MC ONLY)	0.130 %
SAGE MC	OBILE MONT	HLY ACCESS			\$		ASSESSMENTS (DIS	COVER®)		0.105 %
SAGE MO	OBILE ADD-0	ON MONTHLY ACCES	S (PER LINE)		\$		MASTERCARD® NE	TWORK ACCESS & B	RAND USAGE	\$ 0.02
COMPLIM	IENTARY ON	ILINE REPORTING			\$		VISA® AQUIRER PR	ROCESSING FEE		\$ 0.02
☐ MSP I	NETWORK F	EE			\$ 2.50		VISA® CHECK CAR	D SURCHARGE (RET / R	EST R 1 TIERED ONLY)	\$ 0.05
							DISCOVER® DATA	USAGE FEE		\$ 0.02
H INFORM		AFTED BY SAGE	NAME ON C	CHECK			CHECK NUMBER		CHECK DATE	
	IARDWAR	E / SOFTWARE								
			· ·				TERMINAL / SOFT	WARE TYPE (2)		
TERMIN		VARE TYPE (1)								
			ANTITY				TYPE	Į (YTITMAUÇ	
TERMIN	AL / SOFTV		ANTITY				TYPE PART CONDITION	(QUANTITY	



TERMI	INAL HARDWARE / SOFTWARE				
	TERMINAL APPLICATIONS (1)		TERMINAL APPLICAT	TONS (2)	
Γ	☐ Retail ☐ Supermarket ☐ Hote	el 🔲 AVS 🔲 Restaurant	☐ Retail ☐ Sup	ermarket	☐ AVS ☐ Restaurant
	☐ Server ☐ Tips ☐ Invo	_ ` ` '	☐ Server ☐ Tips		# MOTO (Card Not Present)
	□ Purchase Card □ Auto Close	<u> </u>	Purchase Card	Auto Close:	
	TERMINAL PROGRAMS (1)		TERMINAL PROGRAM	. ,	
	VISANET ☐ TERM	PAYMENTECH HOST	VISANET TERM		AYMENTECH TERM HOST
	PROVIDER	3 (2.0)	PROVIDER		2
L	☐ MERCHANT ☐ ISO	□ SAGE		☐ ISO	☐ SAGE
	☐ AMEX / PIP (Visanet/Paymentech w/Amex software)	additional paperwork required.	☐ AMEX / PIP (Visanet/Paym	entech w/Amex software) add	ditional paperwork required.
-	CVV	Split Dial (Visanet Only)	CVV		Split Dial (Visanet Only)
-	NXT (Paymentech Only) addl paperwork required		■ NXT (Paymentech Only) addl	paperwork required	
	PRINTER (1)		PRINTER (2)		
	TYPE	QUANTITY	TYPE	QI	UANTITY
-	PART CONDITION		PART CONDITION	-	
	□ NEW □ REFURB	SHED EXISTING	□ NEW	REFURBISHE	ED EXISTING
	PROVIDER ☐ MERCHANT ☐ ISO	☐ SAGE	PROVIDER MERCHANT	□ ISO	□ SAGE
<u>_</u>		□ SAGE		<u>□</u> 130	□ SAGE
	PINPAD (1)	OUANTERY.	PINPAD (2)	I a	
	TYPE	QUANTITY	TYPE	QI	UANTITY
	PART CONDITION		PART CONDITION	I	
	□ NEW □ REFURBI	SHED EXISTING	□ NEW PROVIDER	REFURBISHE	ED EXISTING
	PROVIDER ☐ MERCHANT ☐ ISO	☐ SAGE	☐ MERCHANT	□ ISO	□ SAGE
_EASII					-
	LEASE COMPANY	LEASE TYPE	LEASE TERM		LEASE PAYMENT
	LEAGE GOWN AIVI	LEAGETTIE	LEAGE TERM		\$
L	FICATION AND AGREEMENT				<u> </u>
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