



P.O. BOX 6008
PETALUMA, CA 94955-6008

STORE #					

REP #					

CHECK GUARANTEE APPLICATION

BUSINESS INFORMATION					
Business DBA Name:			Business LEGAL Name:		
Business Address:			City:	State:	Zip:
Type of Business:			Tax ID Number:		
Business Phone:		Business Fax Number:		Email:	
OWNERSHIP INFORMATION					
Owner #1/Partner/Officer: (First Name)		(M.I.)	(Last Name)		Title in Business:
Home Address:			City:	State:	Zip:
Driver's License Number:		Social Security #:		Phone Number:	
BANK ACCOUNT INFORMATION					
Account Type: <input type="checkbox"/> Business Checking <input type="checkbox"/> Consumer/Principal's Personal Checking				Name of Bank:	
Name on Bank Account:			Bank Phone Number:		
Bank Routing Number:			Bank Account Number:		
SCHEDULE OF FEES					
Discount Rate: %		Monthly Subscription Fee: \$		Monthly Minimum: \$	Request Check Limit: \$
Transaction Fee: \$		Chargeback Fee: \$		Returned Item Fee: \$	Cancellation Fee: \$
Total Monthly Check Sales: \$				Average Check Amount: \$	
EQUIPMENT					
<input type="checkbox"/> Check Imager	Qty: _____	Shipping (standard 2 day): <input type="checkbox"/> Overnight <input type="checkbox"/> Priority <input type="checkbox"/> Saturday		Ship To: <input type="checkbox"/> Merchant Physical <input type="checkbox"/> Sales Partner	
ACCEPTANCE					
<p>In signing the Application/Service Agreement (hereinafter "Agreement") YOUR STORE(s) agrees that YOUR STORE(s) has read, understands, and accepts, all the provisions of this Agreement, to include the terms and conditions within this Agreement and consent to same herein. YOUR STORE(s) further understands and agrees that upon acceptance of an officer of CrossCheck, Inc. (hereinafter "Check Center"), this Application, and your Confirmation Letter, including description of any Premiums purchased, shall constitute a binding Agreement between YOUR STORE(s) and Check Center. YOUR STORE(s) further understands that YOUR STORE(s) shall include all Agents, Representatives, and/or Employees. All information contained in this Agreement was completed by Consumer/Principal and they warrant that the application information noted above and sales volume indicated in the Agreement is accurate and further acknowledge that any misrepresentation of this information could result in delayed and/or withheld settlement of funds as well as the loss of all processing privileges of all checks. No blank spaces were left incomplete. N/A or none has been filled in, in any spaces where applicable. Authorization is hereby given by Consumer/Principal, individually and as Consumer/Principal on behalf of YOUR STORE(s) to obtain a credit report of both the Consumer/Principal and YOUR STORE(s)' credit history through credit reporting agencies selected by Check Center or Check Center's agents. Pursuant to the Fair Credit Reporting Act, said reports are to be used by Check Center or Check Center's agents solely in connection with the referenced business transaction, to be defined herein as this Agreement, there is a legitimate business need for the information and it is intended to be used as a potential servicer in connection with a valuation of, or an assessment of the credit or prepayment risks associated with an existing obligation.</p>					
<p>See confirmation letter for definitions of services you have selected. Your store(s) signature verifies all information on this application and represents your store(s)' express consent to all terms and conditions on subsequent pages, and confirms your offer to enter into an agreement. <i>Please sign in both areas below:</i></p> <p>Signature of Owner/Guarantor: _____ Date: _____</p> <p>Signature of Consumer/Principal: _____ Date: _____</p>				<p>(Corporate office use only)</p> <p>Check center's acceptance of your application, to include any premiums, accepted by an officer of check center in your confirmation letter, forms the entire agreement.</p> <p>By: _____ Date: _____</p> <p>Title: _____</p> <p>Venue: Sonoma County, California</p>	