



BUSINESS INFORMATION

- Legal Name of Business:
- DBA:
- EIN/Tax ID:
- Business Start Date: _____ State Filed: _____
- Business Type: ☐ Sole Prop ☐ Corporation ☐ LLC ☐ Non-profit (401(c)) ☐ Gov ☐ Other
- Location Address:
- Legal Address : .
- Business/Contact Telephone:
- Business/Contact email:
- Customer Service Telephone:
- Customer Service email:
- Website/URL* :
- Authorized Contact First/Last Name:

- **Equipment/Gateway** :
- **Shopping Cart** (if applicable) :

- Location : ☐ Home/Residential ☐ Office/Business District ☐ Storefront
- Own or Rent: ☐ Own ☐ Rent
- Approximate Sq. Footage: ☐ 0-500ft. ☐ 501-2,000ft. ☐ 2,001-5,000ft. ☐ 5,000ft.+

PRINCIPAL INFORMATION (include all w/25%+ equity)

Primary Owner:

- Full Name:
- Ownership %:
- Title (*Owner, CEO, President, etc.*):
- Home Telephone:
- Date of Birth:
- Social Security Number:
- Driver License Number:
Exp Date: _____ Issue Date: _____ State : _____
- Home Address:
- Personal Email address:

Secondary Owner (If more than one owner):

- Full Name:
- Ownership % :
- Title (*Owner, CEO, President, etc.*):
- Home Telephone:
- Date of Birth:
- Social Security Number:
- Driver License Number:
Exp Date: Issue Date: State :
- Home Address:
- Personal Email address:

SETTLEMENT ACCOUNT INFORMATION

- Bank Name:
- Bank Routing Number:
- Bank Account Number:

LIST TYPE OF BUSINESS/PRODUCTS/SERVICES SOLD:

PROCESSING VOLUME:

- Estimated TOTAL Monthly Volume (*Cash, Checks, ACH, Credit Cards, etc*): \$
- Estimated Monthly Volume (*Visa/MC*): \$
- Estimated Monthly Volume (*American Express*): \$
- Estimated Monthly Volume (*Discover*): \$
- Average Ticket: \$
- Highest Ticket: \$

TRANSACTION METHOD (select all which are applicable)

- ☐ **Face-to-face** (Retail/storefront, cardholder is Present):
- ☐ ****Telephone/Mail/Email** (MOTO, cardholder is Not Present):
- ☐ ****Internet** (eCommerce, online Shopping Cart) :

(Must Total 100%)

RETURN POLICY / HISTORY

- **Do you have a refund/cancellation policy for Visa/MC/Discover/Amex Sales:** ☐ Yes ☐ No
Check one : ☐ Exchange ☐ Store Credit ☐ Refund within 30 days ☐ *Other**
If *Other**, please explain :
- **Any processing history?** ☐ Yes ☐ No
*If Yes, please provide 3-most recent Processing Statements
*Name of any current &/or previous Processors:
- **Have you ever had a payment relationship terminated?** ☐ Yes* ☐ No
If Yes*, please explain:
- **Any Bankruptcies?** ☐ Yes* ☐ No
If Yes*, please explain:

- **B2B :** **B2C :**
 - **Is your business Seasonal?** ☐ Yes ☐ No
 - **Is there a recurring/subscription element to the business transactions?** ☐ Yes ☐ No
- If yes, please specify :

***Please complete next section: Card Not Present & eCommerce Questionnaire*

CARD NOT-PRESENT & ECOMM/ONLINE MERCHANTS

1. List the name(s)/Addresses where the product is purchased:

2. Who ships the product(s)?
☐ Merchant ☐ Vendor

List the name(s) of Fulfillment house, if any:

3. List the name(s) of Shopping Carts and/or CRM provider(s), if any:

4. How does the customer purchase/order the product?
☐ In person ☐ By Mail/phone ☐ Internet/Website ☐ By Fax ☐ Other

5. When you receive Authorization, how long before the merchandise/service is shipped?
☐ 0-7 days ☐ 8-14 days ☐ 15-30 days ☐ 30-90 days ☐ 90+ days

6. What is the delivery time frame of the product/service to the customer?
☐ 0-7 days ☐ 8-14 days ☐ 15-30 days ☐ 30-90 days ☐ 90+ days

7. List the name(s) of Chargeback Management Systems, if any:

8. Any Deposits required? ☐ Yes ☐ No *If Yes, what's the deposit %?

9. At what point has the customer paid in full?
☐ 100% Paid in Advance ☐ 100% Paid upon delivery/completion

10. In what geographic areas will the product(s) be marketed & sold?

11. What % of sales transactions are international cards?