



Agent/Office

Control #

1. Business Information

Type of Business:

- Sole Proprietorship
Corporation
Partnership
Limited Liability Company
Other

Business Name (DBA if applicable)

Date Established(MM/YYYY)

Business Legal Name

Contact Name

Industry (Restaurant, Hotel, etc.)

Federal Tax ID

Contact Phone #

Type of Goods or Services Sold

Business Phone Number

Mailing Address Name

Type of Application:

- Single Location
Multiple Locations (Chain)
Additional Chain Location

Business Street Address Line 1

Mailing Address Line 1

Business Street Address Line 2

Mailing Address Line 2

Number of Locations

City State Zip

City State Zip

Type of Business Location:

- Retail Storefront
Internet Storefront
Business Office
Residence
Other

Business e-Mail Address

Business Fax Number

Years at Main Location

2. Merchant History

Ever Accepted Credit Cards Before ?

- Yes No

If Yes, Name of Processor:

Ever Had an Account Cancelled?

- Yes No

If Yes, Name of Processor:

Reason for Cancellation:

Date of Cancellation:

3. Transaction Information

Table with 5 columns: Card Type, Total Monthly Sales, Monthly Visa/MC Sales, Avg Ticket, % of MOTO. Includes rows for Visa/MasterCard, American Express, Discover/Novus, Diners/Carte Blanche, and JCB.

4. Business Owners/Officers/Partners

Table for Business Owners/Officers/Partners with columns for Name, Social Security #, Percent Owned, Phone #, and Owner/Officer Since. Includes fields for Residence Address, City, State, Zip, and Title.

5. Business Checking

Table for Business Checking with columns: Bank Name, Checking Account #, Transit Routing #, Years Open, Bank Address, City, State, Zip.

6. Product Selection

Table for Product Selection with columns: Product Type (Dial Terminal, Internet Gateway, POS Software, DialPay, Other Product), Quantity, URL Address, Name of Product/Vendor, Name of Vital Certified Product, and Notes.

7. Dial Terminal Features

Table for Dial Terminal Features with columns: Feature (Access Code, Auto Batch Close, Reset Reference # Daily, Receipt Header Line 4, Receipt Header Line 5, Receipt Footer, Invoice # Prompt On, Fraud Control On, Password Protect On, Split Dial (AMEX), Terminal Reminder to Check Totals, Tip Option On, Clerk Enabled, Phone Training for Merchant?) and options (Yes/No, AM/PM, HR/MIN).



By signing the Merchant Application, Merchant understands the rates and fees stated below correspond to the volume and average ticket indicated on page 1 of the Application. In the event Merchant's actual activity is less than the volume and average ticket on page 1, Merchant is subject to an increase in rates and fees.

Business Name (as shown on Application)	Contact Name	Phone Number
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1. Visa/MasterCard Rates & Fees

Qualified Rate	%
Transaction Fee	¢
Mid Qual/Non Qual Rate	% + Per Item ¢
Priced as: <input type="checkbox"/> Retail <input type="checkbox"/> Moto <input type="checkbox"/> Hotel <input type="checkbox"/> Supermarket <input type="checkbox"/> Other _____	

2. Other Transaction Fees

American Express	¢
Discover/Novus	¢
Diners/Carte Blanche	¢
JCB	¢
Debit (Pin-based)	¢
Check Verification	¢
DialPay Auth & Capture	¢
Internet Gateway Transaction Fee	¢
Wireless Transaction Fee	¢

3. Miscellaneous Fees

New Account Application (One Time)	\$
New Account Setup (One Time)	\$
Merchant Statement (Monthly)	\$
Help Desk (Monthly)	\$
Debit Gateway (Monthly)	\$
Annual Fee	\$
Monthly Minimum	\$
Internet Payment Gateway (Monthly)	\$
Wireless Service Fee (Monthly)	\$

Comments:

Merchant Signatures

By submitting this Merchant Account Application, Merchant: 1) Certifies that all information provided in this Application is correct, 2) Understands additional information may be needed before this Application can be fully evaluated, 3) Has reviewed and accepted all terms of the attached Merchant Agreement and Pricing Schedule, 4) Authorizes credit and debit entries to Merchant's business checking account, 5) Agrees to notify Bank or Company if any information in this Application changes, 6) Understands that incomplete or inaccurate information may result in account denial or cancellation, 7) Agrees that in the event the Merchant Agreement is modified, continuing to process transactions constitutes acceptance of the revised Merchant Agreement, 8) Authorizes the request of consumer and business credit reports from consumer and business credit reporting agencies, and verification of all information contained herein.

Printed Name Owner/Officer/Partner 1 ^X	Signature ^X	Date ^X
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Printed Name Owner/Officer/Partner 2	Signature	Date
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For Bank or Company Use When visiting the merchant's place of business, please answer the following questions and sign below.

Address of location inspected
 Business Address Mailing Address Other:

Does name posted at business match business name on application?	Are store hours posted?
Does location have appropriate business signage?	Did you view merchant's inventory?
Was inventory consistent with merchant's type of business?	# of employees:
Does inventory appear to be adequate for the sales volume indicated on the application?	

Bank or Company Name	Bank or Company Region	Branch or Office Name	Branch or Office #
Sales Representative Name	Sales Rep Phone #	Sales Rep Region	Sales Rep Code