

Merchant account application form

SECTION 1 – OPERATIONS / ASSET COMPANY INFORMATION

Legal Name

Street Address

Zip/Postal Code

City

Country

Telephone Number

Fax Number

Owner*

Shop URL**

Corporate URL***

*- Must be the same person as detailed in Section 2

** - This the URL at which you sell your product(s); Please list all URL's you operate

*** - This is the URL which contains corporate information, and is different from Shop URL.

SECTION 2 - OPERATIONS COMPANY DIRECTOR INFORMATION

Name

Date of Birth

E-mail Address

Phone Number

Ownership*

* - Percentage ownership in Operations Company

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SECTION 3 - CREDIT CARD PROCESSING INFORMATION

In what currency do you plan on transacting business?	US\$ <input type="checkbox"/> GBP <input type="checkbox"/> EURO <input type="checkbox"/>	
“Average” Transaction Information (Per Card)	Minimum Transaction Amount \$	
	Maximum Transaction Amount \$	
	Maximum Daily Amount \$	
	Maximum Daily Transaction count #	
	Maximum Monthly Amount \$	
Credit Card Narrative*		
Shop Location **		
Recurring Transactions	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Which credit card do you want to process throughout firm?	Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Diners Club <input type="checkbox"/>	

*- No longer than 22 characters. It must either be the Shop-URL or the company name. (Please list separate narrative for all accounts.)

** - Maximum of 13 characters and cannot contain special characters. It can either be City & Country or customer service number

SECTION 4 – CUSTOMER & TECHNICAL SUPPORT INFORMATION

Customer Support Email	
Customer Support International Accessible	

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Telephone Number		
Technical Support Email		
Login Details (Please provide temporary details)	User ID:	
	Password:	

SECTION 5 – BANK DATA (WIRE INSTRUCTIONS)

Merchant Name	
Beneficiary Name	
Name of the Bank	
Street	
Zip Code	
City	
Country	
Contact Person at the Bank:	
Phone	
Account Number	
National Bank Code	
BIC/SWIFT	
IBAN	

SECTION 6 – REQUIRED SCANS AND PAPER COPIES

Certificate of Incorporation	
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Articles of Incorporation or Memorandum	
Bank and/or Commercial Reference Letter	
Business license (if not incorporated)	
Utility Bill of Operations Company	
Proof of Address of Director (Director's Driver's License or Utility Bill)	
Wire Instructions	
3 months of Processing History (Summary Pages Only)	

<p>Last Six Months Credit Card Processing Data</p> <ul style="list-style-type: none"> - Attach a copy of last 6 months processing statement from existing processor. Show each account separate (copies and tables below) - For new business /shops please show the next six month forecast show each account separate (for 	Account 1:				
	VISA Date/Month	VISA Sales \$	Sales TRX*	Charge back \$	Charge back TRX (number)
Total in \$					
Account 2:					
MASTERCA RD	MASTERCA	Sales TRX*	Charge back	Charge back	

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copies and tables below)	Date/Month	RD Sales \$		\$	TRX (number)
Total					

Account 3:

MASTERCA RD Date/Month	MASTERCA RD Sales \$	Sales TRX*	Charge back \$	Charge back TRX (number)
Total				

SECTION 7 – COMPANY OWNER’S DETAILS

Operation/Asset Company	
Name	

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Email address	
Phone Number	
Home Street Address	
Home Address Zip Code	
Home Address City	
Home Address Country	
Identity Card Number	
Percentage Ownership in Operations Company	
Additional Notes	

SECTION 8 – PCI CLASSIFICATION AND STATUS

Does your business store, process and / or transmit cardholder data?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Who is the PCI contact in your company	Name:			
	Phone Email:			
	Acceptance Channel:			
		eCommerce	Moto	Card Present
	VISA			
	MasterCard incl. Maestro			
PCI Assessment Status	PCI certification process –			

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and PCI Assessor	current status:	
	PCI certification date as confirmed by certificate (please attach copy of certificate) (dd/mm/yyyy):	
	Start of process planned for / Process in progress since (dd/mm/yyyy):	
	Completion of process planned for (dd/mm/yyyy):	
	PCI assessor:	
	Company Location:	
	Contact person's name:	
	Phone:	
	Email:	