

Merchant Credit Card Processor Application

ABOUT YOUR BUSINESS

Business **LEGAL** Name: _____

DBA (Doing Business As) Name: _____

Location Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

IMPORTANT!! Circle One: Private Corp. Public Corp. Sole Ownership Partnership

State Incop: _____ Month/Year Started _____/_____/_____ # Of Employees _____

Federal Tax ID # _____ Product/Service Sold: _____

Currently Accepting Credit Cards? Yes or No

If yes, who is your processor? _____ Merchant # _____

Discover Merchant # _____ American Express # _____

TeleCheck Merchant # _____

BUSINESS PREMESIS

Zone - Circle One: Business/Industrial/Residential Approximate SQ Footage _____

Location – Circle One: Home Isolated Mall Office Other _____

Proper License Displayed: Yes or No # Of Registers: _____

Is your business premise: Owned or Rented?

OWNER INFORMATION

Owner/Partner/Officer Name: _____

Social Security #: _____ Date of Birth: _____/_____/_____

Title: _____ % of Ownership: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____