Payment Resources International ®

MERCHANT ADDITIONAL LOCATION FORM

OFFICE #: _____

REP: _____

MID: SIC:

SEND MONTHLY MERCHANT STATEMENTS TO:

☐ CORPORATE HEADQUARTERS ☐ LOCATION _____

BUSINESS NAME (DOING BUSINESS AS):

CORPORATE NAME (USE ALSO FOR HEADQUARTER'S INFORMATION):

BUSINESS ADDRESS

BILLING ADDRESS (IF DIFFERENT THAN LOCATION ADDRESS)

CITY STATE ZIP

CITY STATE ZIP

( ) __ __ __ - __ __ __ __
LOCATION PHONE #

CONTACT NAME:

TRANSIT/ABA#

DEPOSIT ACCOUNT #

( ) __ __ __ - __ __ __ __
LOCATION FAX #

( ) __ __ __ - __ __ __ __
CONTACT PHONE #

PLEASE LIST EXISTING LOCATION (s)

BUSINESS E-MAIL OR WEBSITE ADDRESS

CONTACT FAX # / E-MAIL ADDRESS

EXISTING MERCHANT NUMBER(S)

TRANSACTION INFORMATION:

CARDS SWIPED _____% MANUAL ENTRY _____% SEASONAL? ☐ NO ☐ YES, HIGH VOLUME MONTHS _____

MANUAL ENTRY, CARD NOT PRESENT OR NO IMPRINT _____% IF HAND ENTERED, ARE IMPRINTS OBTAINED? ☐ YES ☐ NO

WHERE IS SALE TRANSACTED? STORE FRONT _____% FLEA MARKET _____% DOOR TO DOOR _____% TELEPHONE _____% MAIL ORDER _____%

WHOLESALE _____% OTHER (SPECIFY) _____ _____%

GROSS MONTHLY SALES VOLUME $ _____ AVE MONTHLY VISA/MC VOLUME $ _____ AVE VISA/MC TICKET $ _____
(ESTIMATE IF NEVER PROCESSED IN THE PAST)

OPTIONAL SERVICES

OTHER CARD SERVICES CURRENTLY IN USE	MERCHANT NUMBER	PER TRANS COST	OTHER CARD SERVICES CURRENTLY IN USE	MERCHANT NUMBER	PER TRANS COST
AMERICAN EXPRESS		$	DINER'S/CARTE BLANCHE		$
DISCOVER		$	CHECK GUARANTEE		$
OTHER CARD TYPE		$			$

EQUIPMENT – EXISTING OR PURCHASING

PURCHASING PRICE DOES NOT INCLUDE SALES TAX OR SHIPPING AND HANDLING CHARGES.

Term Model _____ QUANTITY _____ ☐ PURCHASE FROM PRI ☐ REPROGRAM TOTAL COST _____

Printer Model _____ QUANTITY _____ ☐ PURCHASE FROM PRI ☐ REPROGRAM TOTAL COST _____

PTC Software _____ QUANTITY _____ ☐ PURCHASE FROM PRI ☐ REPROGRAM TOTAL COST _____

Manual Imprinter _____ QUANTITY _____ TOTAL COST _____

PROGRAM _____ SETUP FEE: $ _____ GATEWAY PER TRANS FEE: $ _____ MONTHLY FEE: $ _____

FOR BANK USE ONLY

THE DISCOUNT RATE FOR EACH TRANSACTION IS:

VISA/MC _____% TRANS FEE $ _____ STATEMENT FEE $ _____ *(PER LOCATION)* APPLICATION FEE $_____ *(PER LOCATION)* MINIMUM MONTHLY FEE $ _____

DEBIT ACCESS FEE $_____ DEBIT TRANSACTION FEE $_____ VOICE AUTH $_____ CHARGEBACK FEE $_____
(SURCHARGE IDENTIFIED ON MASTER AGREEMENT APPLIES TO ALL TRANSACTIONS, WHICH FAIL TO MEET VISA AND MASTERCARD REQUIREMENTS FOR ELECTRONIC DATA CAPTURE INTERCHANGE REQUIREMENTS.)

THE UNDERSIGNED MERCHANT AGREES TO ALL THE TERMS OF THE EXECUTED MERCHANT BANK CARD AGREEMENT, INCLUDING THE ADDITIONAL TERMS AND CONDITIONS.

MERCHANT OWNER/OFFICER SIGNATURE TITLE OF SIGNER DATE

ACCEPTED BY

PRI:

TITLE DATE

BANK:

TITLE DATE

Rev7/17/02