



"Send via fax to 1-206-202-3755"

PREPAY POINT
MERCHANT APPLICATION FORM

CORPORATE AND PERSONAL INFORMATION

Company Name: (Hereinafter referred to as "Merchant")
Distributor:
DBA (if any):
Email:
Contact Name:
Tel:
Address:
Fax:
Mobile:
Federal Tax ID:
Type of Business: Partnership Sole Proprietorship Corporation (LLC) Limited Liability Corp.
Date of Formation/Incorporation:
State of Incorporation:
Primary Owner's Name:
Social Sec. No:
Home Address:
Date of Birth:

TERMINAL OPTIONS :

A. New terminal B. Program Existing terminal C. Virtual Terminal
Lipman Nurit 2080 2085 3020
Verifone 330 380 460 3750
Ingenico 710 712
Other (specify):
D. Pin by Phone - Call 800-680-8308
Registered Phone:
Registered Fax:
4 Digit Password: (optional)

CHARGES/FEES: In addition to any Applicable or Additional Fees in the Terms of Use, Merchant shall be charged:

Set-up Fee (one time): \$ Monthly Access Fee: \$ Other \$

DECLARATION, ACKNOWLEDGEMENT AND AGREEMENT TO TERMS OF USE

Merchant acknowledges and agrees that this Merchant Application Form ("Application Form") is an application for "Services", as further described in VIAONE's Merchant Services Terms of Use ("Terms of Use") provided by Via One Technologies, Inc. ("VIAONE"). VIAONE in its sole discretion shall determine whether to accept this application and provide Merchant with such Services. In the event that VIAONE accepts this Application and agrees to provide Merchant with such Services, VIAONE's acceptance of this Application and agreement to provide Services shall be conditioned upon Merchants complete and strict compliance with the Terms of Use. As such, in the event that this Application is accepted by VIAONE, Merchant shall be bound by the terms and conditions of the Terms of Use, including all amendments to such Terms of Use made by VIAONE. In addition to other provisions in the Terms of Use, VIAONE shall provide Services to Merchant, and Merchant shall use such Services for an initial term of three (3) years beginning from the date this Application is accepted by VIAONE ("Initial Term"), with such Initial Term being automatically renewed each year, on an annual basis, unless the then current term is earlier terminated by either party in accordance with the Terms of Use. Merchant acknowledges and agrees that Merchant has received, has read, understands and will strictly comply with the Terms of Use. Merchant authorizes VIAONE to obtain personal and company credit reports from credit bureaus and or verify information provided in this Application Form. Merchant also represents that Merchant is not a party to any agreement that would prevent Merchant from obtaining Services, or doing business with Via One Technologies or its partners. In signing below, signor represents and warrants that all information contained in this Application Form is true and correct and that he/she is a duly authorized representative of Merchant, and has the authority to sign this Agreement and bind Merchant as is noted herein and in the Terms of Use.
Print Name: Signature: Date:

ACCEPTANCE AND MERCHANT SET-UP BY VIAONE (to be filled in by VIAONE only):

E- Partner PIN Security Deposit \$
Re-Sale Certificate Set-up Date
Via One hereby accepts Merchant Application form and agrees to provide Merchant with Services in accordance with the Terms of Use.
Signed: Date:
Name: Title:



**AUTOMATED CLEARING HOUSE ("ACH") AUTHORIZATION AGREEMENT**

Subject to (i) the terms set forth in the Merchant Application Form dated as of \_\_\_\_\_, 2006, submitted by \_\_\_\_\_ ("Merchant") (ii) VIAONE's Merchant Services Terms of Use, (iii) the Operating Rules of the National Automated Clearing House Association, and (iv) applicable federal regulations governing Automated Clearing House ("ACH") transactions, I (we) do hereby authorize Via One Technologies, Inc., and any partner or subsidiary of Via One Technologies, Inc (collectively referred to as "VIAONE" for the purposes of this ACH Authorization) to initiate debit and credit entries to the account specified below for obligations owing from time to time resulting from the transactions described in the Merchant Services Terms of Use.

I certify under penalty of perjury that am a duly authorized as a check signer on the account identified below and am authorized to provide all relevant consents and representations contained in this ACH Authorization, as evidenced by my signature below.

Financial Institution Name: \_\_\_\_\_ Branch: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  Checking  Savings

In the event that VIAONE incurs any charges due to failure of an ACH debit to properly process to Merchant's account specified above (after several attempts by VIAONE), or in the event that such account does not have sufficient funds to permit the ACH debit to go through, I (we) hereby grant VIAONE the authority to debit the account for all such charges and expenses incurred together with a \$25 administrative fee per failed ACH. This authorization is to remain in full force and effect until VIAONE has received written notification from me or another duly authorized representative of Merchant of it's the termination hereof in such time and in such manner as to afford VIAONE and its partners, a reasonable opportunity to act on it.

Name on Account/Merchant: \_\_\_\_\_  Business  Personal

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

**Please attach a voided check from the account specified above**  
(Starter checks will not be accepted)