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## MERCHANT CARD SERVICES APPLICATION

### MERCHANT INFORMATION

Name of Business \_\_\_\_\_ Merchant Doing Business as Name \_\_\_\_\_

Mailing/Billing Address \_\_\_\_\_ Location Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_ City/State/ZIP \_\_\_\_\_

Business Phone # \_\_\_\_\_ Business Fax # \_\_\_\_\_ Merchant Phone # \_\_\_\_\_

Primary Merchant Contact \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Website URL address \_\_\_\_\_

Years in Business \_\_\_\_\_ How Long at This Location \_\_\_\_\_ Tax ID # \_\_\_\_\_ # of Locations \_\_\_\_\_

#### Type of Business:

- Retail       Restaurant       Convenience Store       Mail Order       Internet Order  
 Wholesale       Lodging       Convenience Store w/Gas       Telephone Order       Other

If Mail/Telephone Order, What Percentage \_\_\_\_\_%      If Internet Order, What Percentage \_\_\_\_\_%

#### Describe the Merchandise Sold or Service(s) Provided:

#### Check Method of Advertising and Include any Materials:

- Yellow Pages Ad       Direct Mail-Letter/Brochure       Newspaper/Magazine Advertisement       Catalog  
 Telephone/Telemarketing       Referral       Television/Radio       Internet

#### Ownership Type:

- Sole Proprietorship       Corporation       Partnership       Limited Liability Company       Other \_\_\_\_\_

Equipment Type:     Lease       Purchase       Reprogram      Comment: \_\_\_\_\_

Credit Card Type:     VISA®/MasterCard®/Discover®       American Express®

### OWNERS OR OFFICERS

(1) Name \_\_\_\_\_ Title \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Residence Address \_\_\_\_\_ City/State/ZIP \_\_\_\_\_  
 Former Address \_\_\_\_\_ City/State/ZIP \_\_\_\_\_  
 Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Home Telephone # \_\_\_\_\_

(2) Name \_\_\_\_\_ Title \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Residence Address \_\_\_\_\_ City/State/ZIP \_\_\_\_\_  
 Former Address \_\_\_\_\_ City/State/ZIP \_\_\_\_\_  
 Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Home Telephone # \_\_\_\_\_

**CREDIT INFORMATION**

Monthly Credit Card Volume \$ \_\_\_\_\_ Average Ticket \$ \_\_\_\_\_

Mail, Telephone, Internet Order Sales *(Complete if any portion of your sales are generated through mail/telephone/internet order.)*

Percent of Monthly Sales Generated Through: Mail Order \_\_\_\_\_% Telephone Order \_\_\_\_\_% Internet Order \_\_\_\_\_% Total=100%

Number of Days to Prepare Shipment for Delivery to Customers from Date of Order \_\_\_\_\_

Percent of Customer Orders Delivered in 0-7 Days \_\_\_% 8-14 Days \_\_\_% 15-30 Days \_\_\_% More Than 30 Days \_\_\_% Total =100%

Card Sales are Deposited (Check One)  At Date of Shipment  Other

Name of Fulfillment House \_\_\_\_\_

Delivery Time Frame \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Name of Shipping Service Used \_\_\_\_\_

Delivery Time Frame \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

How Do You Advertise for Your Mail/Telephone Order Sales? (Check as appropriate)

Catalog  Direct Mail/Brochure  Television/Radio  Telephone/Telemarketing  Newspaper/Magazine Ads (Specify names)

*NOTE: Current Copies of the Above Material Should be Attached.*

**SALES DEPOSIT POLICY**

Are Consumers Required to Provide a Deposit?  Yes  No If Yes, Percent Required \_\_\_\_\_%

If Yes, Number of Weeks Until Complete Delivery of Product/Service: \_\_\_\_\_

**REFUND POLICY**

Do You Have a Refund Policy for Your Card Sales?  Yes  No

Check the Applicable Refund Policy  Cash  Exchange  Store Credit  Card Credit

If Card Credit, Within How Many Days are Credit Transactions Deposited?  0-3 Days  4-7 Days  8-14 Days  Over 14 Days

**BUSINESS CREDIT REFERENCES**

(1) Name \_\_\_\_\_

Telephone # \_\_\_\_\_

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Contact \_\_\_\_\_

Account # \_\_\_\_\_

(2) Name \_\_\_\_\_

Telephone # \_\_\_\_\_

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Contact \_\_\_\_\_

Account # \_\_\_\_\_

*If Merchant Has Previously Accepted Credit Cards, The Last Three (3) Months of Merchant Statements Must Be Provided.*

Current Processing Institution, If Applicable

Processor Name \_\_\_\_\_

Telephone # \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Contact \_\_\_\_\_

Reason for Changing Processor \_\_\_\_\_

Merchant Account # \_\_\_\_\_

Name of Merchant's Principal Bank \_\_\_\_\_

Account # \_\_\_\_\_

Length of Time at Principal Bank \_\_\_\_\_

Telephone # \_\_\_\_\_ Contact \_\_\_\_\_

Have Any of the Principals File for Bankruptcy?  Yes  No

If Yes, Name: \_\_\_\_\_

Charter Filed \_\_\_\_\_

Date \_\_\_\_\_

County/State \_\_\_\_\_

Have Principals Ever Managed or Owned Another Business That Accepted Charge Cards?  Yes  No

If Yes, Provide Business Name: \_\_\_\_\_

City/State \_\_\_\_\_

MasterCard, Visa and Discover operating procedures requires that VSECU conduct a credit check and/or background investigation of merchants signed by VSECU. **Please read the following and sign below.**

**CREDIT REFERENCES AND INFORMATION AUTHORIZATION**

This application authorizes VSECU to confirm any information contained in this application and/or to obtain credit information or rating concerning us from any trade or bank reference listed in this application or from any credit reporting agency or bureau. I/We will also provide at least one bank reference. I/We agree to allow VSECU the right to conduct a physical inspection of the business premises to assure that the proper facilities, equipment, inventory and necessary license or permit are present to conduct business. I/We also agree to provide VSECU with any additional financial history that may be requested. I/We agree to maintain a sufficient balance in my business share draft checking account to cover any charges, rent and/or other expenses incurred with the acceptance of VSECU's Merchant Services Agreement.

\_\_\_\_\_  
Principal Owner Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Secondary owner/Partner/Officer \_\_\_\_\_  
Date

**PERSONAL GUARANTY**

To induce and in consideration of VSECU's acceptance of this application, the undersigned unconditionally guarantees performance of the merchant's obligations under the application, the agreement, and the payment of all sums due thereunder, and in the event of default, hereby waives notice of default and agrees to indemnify VSECU for any and all funds due from the merchant pursuant to the terms of the agreement independent of and without proceedings against the merchant. This is a guaranty of payment and not of collection. This guaranty shall carry to the benefit of the successors and assigns of VSECU, and shall be binding upon the estates and legal representatives of the undersigned.

\_\_\_\_\_  
Signature, an individual \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature, an individual \_\_\_\_\_  
Date

*Note: This application in its entirety and the above signature(s) are required in order for this application to be processed.*

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**VSECU INTERNAL USE**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Processing Rate: \_\_\_\_\_

Complete Merchant Set Up Form: \_\_\_\_\_ Complete Site Inspection: \_\_\_\_\_ Complete Agreement: \_\_\_\_\_