

# Merchant Processing Application and Agreement

Please review the information below and sign if everything looks right. If you have any questions please contact your representative.

## SETUP INFORMATION

Sales Code	<input type="text" value="BLUE-4053"/>	Application Platform	<input type="text" value="North"/>
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## BUSINESS DETAILS

### CONTACT INFORMATION

First Name	<input type="text"/>	Last Name	<input type="text"/>
Email	<input type="text"/>	Phone Number	<input type="text"/>

### BUSINESS INFORMATION

NOTE: Failure to provide accurate information may result in a withholding of merchant funding per IRS regulations. (See Part IV, Section A.4 of your Program Guide for further information.)

Business Legal Name	<input type="text"/>	DBA Name	<input type="text"/>
Tax Filing Name	<input type="text"/>	Tax Filing Method	<input type="checkbox"/> EIN <input type="checkbox"/> SSN
Tax ID (EIN)	<input type="text"/>		
Type of Ownership	<input type="checkbox"/> Government <input type="checkbox"/> Individual / Sole Proprietor <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Non-Profit Org <input type="checkbox"/> Partnership <input type="checkbox"/> Private Corporation <input type="checkbox"/> Public Corporation		
	<input type="checkbox"/> Tax Exempt		
Stock Exchange (Only applicable for Public Corporations)		Stock Ticker Symbol	<input type="text" value="(NYSE or NASDAQ)"/>
	<input type="checkbox"/> NYSE or NASDAQ <input type="checkbox"/> Other/Not Applicable		
Industry (MCC)	<input type="text"/>	Business Description	<input type="text"/>
Industry Options	<input type="checkbox"/> Quasi Cash	Business Start Date	<input type="text"/>
Website	<input type="text"/>	Business Phone	<input type="text"/>

### BUSINESS LEGAL MAILING ADDRESS

Street Address 1	<input type="text"/>		
Street Address 2	<input type="text"/>	City	<input type="text"/>
State	<input type="text"/>	ZIP	<input type="text"/>
Country	<input type="text"/>		

### BUSINESS ADDRESS

Street Address 1	<input type="text"/>		
Street Address 2	<input type="text"/>	City	<input type="text"/>
State	<input type="text"/>	ZIP	<input type="text"/>
Country	<input type="text"/>		

## OWNER INFORMATION

Please provide the following information for each individual who owns, directly or indirectly, 25% or more of the equity interest of your business.

### ADDITIONAL BUSINESS OWNER (1)

First Name	<input type="text"/>	Last Name	<input type="text"/>	Street Address 1	<input type="text"/>		
% Ownership	<input type="text" value=""/>	SSN	<input type="text"/>	Street Address 2	<input type="text"/>	City	<input type="text"/>
Date of Birth	<input type="text"/>	Mobile Phone	<input type="text"/>	State	<input type="text"/>	ZIP	<input type="text"/>
				Country	<input type="text"/>		

**BUSINESS OWNER INFORMATION**

<b>First Name</b>	<input type="text"/>	<b>Last Name</b>	<input type="text"/>	<b>Street Address 1</b>	<input type="text"/>		
<b>Title</b>	<input type="checkbox"/> CEO <input type="checkbox"/> CFO <input type="checkbox"/> COO <input type="checkbox"/> LLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Partner <input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> Vice President			<b>Street Address 2</b>	<input type="text"/>	<b>City</b>	<input type="text"/>
<b>% Ownership</b>	<input type="text"/>	<b>Personal Guarantee</b>	<input type="checkbox"/> Yes	<b>State</b>	<input type="text"/>	<b>ZIP</b>	<input type="text"/>
<b>Country</b>	<input type="text"/>						
<b>SSN</b>	<input type="text"/>	<b>Date of Birth</b>	<input type="text"/>				
<b>Mobile Phone</b>	<input type="text"/>						
<b>Email</b>	<input type="text"/>						

**ADDITIONAL BUSINESS OWNER (2)**

<b>First Name</b>	<input type="text"/>	<b>Last Name</b>	<input type="text"/>	<b>Street Address 1</b>	<input type="text"/>		
<b>% Ownership</b>	<input type="text"/>	<b>SSN</b>	<input type="text"/>	<b>Street Address 2</b>	<input type="text"/>	<b>City</b>	<input type="text"/>
<b>Date of Birth</b>	<input type="text"/>	<b>Mobile Phone</b>	<input type="text"/>	<b>State</b>	<input type="text"/>	<b>ZIP</b>	<input type="text"/>
<b>Country</b>	<input type="text"/>						

**ADDITIONAL BUSINESS OWNER (3)**

<b>First Name</b>	<input type="text"/>	<b>Last Name</b>	<input type="text"/>	<b>Street Address 1</b>	<input type="text"/>		
<b>% Ownership</b>	<input type="text"/>	<b>SSN</b>	<input type="text"/>	<b>Street Address 2</b>	<input type="text"/>	<b>City</b>	<input type="text"/>
<b>Date of Birth</b>	<input type="text"/>	<b>Mobile Phone</b>	<input type="text"/>	<b>State</b>	<input type="text"/>	<b>ZIP</b>	<input type="text"/>
<b>Country</b>	<input type="text"/>						

**ADDITIONAL BUSINESS OWNER (4)**

<b>First Name</b>	<input type="text"/>	<b>Last Name</b>	<input type="text"/>	<b>Street Address 1</b>	<input type="text"/>		
<b>% Ownership</b>	<input type="text"/>	<b>SSN</b>	<input type="text"/>	<b>Street Address 2</b>	<input type="text"/>	<b>City</b>	<input type="text"/>
<b>Date of Birth</b>	<input type="text"/>	<b>Mobile Phone</b>	<input type="text"/>	<b>State</b>	<input type="text"/>	<b>ZIP</b>	<input type="text"/>
<b>Country</b>	<input type="text"/>						

**BANKING AND PROCESSING****DEPOSIT AND WITHDRAWAL BANK ACCOUNT**

<b>Bank Name</b>	<input type="text"/>		
<b>Account Type</b>	<input type="checkbox"/> Business Checking <input type="checkbox"/> Savings		
<b>Routing Number</b>	<input type="text"/>	<b>Account Number</b>	<input type="text"/>

**PROCESSING VOLUME**

<b>Average Monthly Card Volume</b>	\$	<input type="text"/>	/ month
<b>Average Transaction Amount</b>	\$	<input type="text"/>	

**PRODUCT / SERVICE DELIVERY WINDOWS**

On average, Products / Services are delivered in

0-7 Days  8-14 Days  15-30 Days  30+ Days

**MODE OF TRANSACTION**

<b>In Person</b>	<input type="text"/>	%
<b>Telephone</b>	<input type="text"/>	%
<b>Online</b>	<input type="text"/>	%
<b>Must total 100%</b>		

## EQUIPMENT

### NEW ORDERS

Product Name	Network	Qty	Price *	Frequency
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$	<input type="text"/>

Clover Menu Requested

*\* Price does not include tax and shipping & handling.*

### SHIP EQUIPMENT TO

<b>Ship To Attention</b>	<input type="text"/>	<b>Ship To Email</b>	<input type="text"/>
<b>Street Address 1</b>	<input type="text"/>		
<b>Street Address 2</b>	<input type="text"/>	<b>City</b>	<input type="text"/>
<b>State</b>	<input type="text"/>	<b>ZIP</b>	<input type="text"/>
<b>Country</b>	<input type="text"/>		

## MERCHANT SERVICES

### PAYMENTS ACCEPTED

American Express Opt Blue
  Discover Full ACQ
  Mastercard
  Visa

### AMERICAN EXPRESS

**Amex Program**  Amex OptBlue  Amex ESA  
**Amex ESA SE**  **IATA/ARC Number**

### DISCOVER

**Discover Program**  Discover Full ACQ  Discover EASI

**Discover EASI SE**

#### Discover Industry Options

Enable Incremental Authorizations  
 Debt Repayment Program

## PRICING INFORMATION

### PRICING

**Discount Frequency**  
 Monthly  Daily  
**Funding Rollup**  
 Net Fees and Deposits  Separate Fees and Deposits  Individual Batches

### DUES & ASSESSMENTS

Dues & Assessments  
 (See Agreement for definitions, warranty requirements, and any additional fees.) All other card association fees are passed thru at cost - NABU, APF, connectivity, & usage.

### INTERCHANGE PLUS

Pass Through Interchange — Includes Dues and Assessments. You will be charged the applicable interchange rate from MasterCard, Visa or Discover, plus a MasterCard Assessment Fee of 0.13%, a Visa Assessment Fee of 0.14%, or a Discover Assessment Fee of 0.13%, plus any other fees indicated on this Service Fee Schedule. (MC Assessment Fee when transaction is equal to \$1,000 or more will be assessed an additional 0.01% per transaction.) American Express Assessment Fee of 0.15%

<b>Passthrough Interchange Costs</b>	<input type="checkbox"/> Gross Interchange <input type="checkbox"/> Net Interchange	
<b>Discount Fees</b>	<b>Credit / Non-PIN Debit</b>	
Visa Qualified	0.5	%
MasterCard Qualified	0.5	%
Discover Qualified	0.5	%
Amex Qualified	0.5	%

**TIERED**

Discount Fees	Credit	Non-PIN Debit	Discount Fees	Credit	Non-PIN Debit
Visa Qualified	<input type="text"/> %	<input type="text"/> %	Discover Qualified	<input type="text"/> %	<input type="text"/> %
Visa Mid-Qualified	<input type="text"/> %	<input type="text"/> %	Discover Mid-Qualified	<input type="text"/> %	<input type="text"/> %
Visa Non-Qualified	<input type="text"/> %	<input type="text"/> %	Discover Non-Qualified	<input type="text"/> %	<input type="text"/> %
Mastercard Qualified	<input type="text"/> %	<input type="text"/> %	Amex Qualified	<input type="text"/> %	
Mastercard Mid-Qualified	<input type="text"/> %	<input type="text"/> %	Amex Mid-Qualified	<input type="text"/> %	
Mastercard Non-Qualified	<input type="text"/> %	<input type="text"/> %	Amex Non-Qualified	<input type="text"/> %	

**BILL BACK**

**Non-Qualified Surcharge Fee** (excluding interchange pass-through fees, see Section 18.1) Applies to Non-qualified MC, Visa, Discover, American Express Credit and/or Non-PIN Debit Transactions.

%

Discount Fees	Credit	Non-PIN Debit
Visa Qualified	<input type="text"/> %	<input type="text"/> %
Mastercard Qualified	<input type="text"/> %	<input type="text"/> %
Discover Qualified	<input type="text"/> %	<input type="text"/> %
Amex Qualified	<input type="text"/> %	

**FLAT RATE**

Discount Fees	Credit / Non-PIN Debit
Visa Qualified	<input type="text"/> %
Mastercard Qualified	<input type="text"/> %
Discover Qualified	<input type="text"/> %
Amex Qualified	<input type="text"/> %

**AUTHORIZATION & TRANSACTION FEES**

Authorization Fees (All Card Types)	<input type="text"/> \$ 0.10	/ Each
ACH Batch Fee	<input type="text"/> \$ 0.10	/ Each
Voice Authorization Fee	<input type="text"/> \$ 0.95	/ Each
Address Verification Fee (AVS)	<input type="text"/> \$ 0.05	/ Each
Transaction Fees (All Card Types)	<input type="text"/> \$ 0.00	/ Each

**PIN DEBIT**

Discount Fee	<input type="text"/> %
Transaction Fee	<input type="text"/> \$ / Each

**EBT**

**FNS#**

Transaction Fee  \$ / Each

**VOYAGER**

Authorization Fee  \$ / Each

Sales Discount  %

**WRIGHT EXPRESS**

Discount Fee	<input type="text"/> %
Transaction Fee	<input type="text"/> \$ / Each
Chargeback Fee	<input type="text"/> \$ / Each
Retrieval Fee	<input type="text"/> \$ / Each

**CARDPOINTE AND GATEWAY FEES**

Setup Fee	<input type="text"/> \$ 0.00	(One Time)
CardPointe Monthly Platform Fee	<input type="text"/> \$ 0.00	/ Monthly
Gateway Transaction Fee	<input type="text"/> \$ 0.00	/ Each
Gateway Monthly Fee	<input type="text"/> \$ 0.00	/ Monthly

**CLOVER SECURITY**

Clover Security Fee  \$ / Monthly

**TRANSARMOR**

TransArmor Token and Encrypt Fee  \$ 0.00 / Monthly

**CLOVER FEES**

Clover Go Service Fee, Per MID  \$ 0.00 / Monthly

**MONTHLY AND MISCELLANEOUS FEES**

Application Fee	\$ 0.00 (One Time)	Annual Membership Fee	\$ 0.00 / Annual
Minimum Processing Fee	\$ 0.00 / Monthly	Regulatory Product Fee	\$ 3.50 / Monthly
DDA Rejects	\$ 25.00 / Each	PCI Non-Compliance Fee	\$ 29.95 / Monthly
Statement Fee	\$ 6.95 / Monthly	Wireless Fee	\$ 0.00 / Monthly
Data Breach Fee	\$ 0.00 / Monthly	Wireless Activation Fee	\$ 0.00 (One Time)
Chargeback Fee	\$ 25.00 / Each	AMEX North Program Cost Fee	0.15 %
Retrieval Fee	\$ 15.00 / Each	PCI Annual Fee	\$ 119.00 / Annual

**CONFIRMATION**

**EARLY TERMINATION FEE**

The initial term of this Agreement is three years from the date of your approval by our Credit Department (the Initial Term). If you terminate this Agreement before the end of the then current term or otherwise stop processing your transactions with us, you will be charged this Early Termination Fee. After the Initial Term, subject to Part IV, Section A.3, this Agreement shall automatically extend for an additional period of one year each (each an Extended Term).

Early Termination Fee

**Client Initials**

**PERSONAL GUARANTEE**

By signing below, signer(s) unconditionally guarantee(s) to the Processor and its successors and assigns the full and prompt payment when due of all its obligations of every kind and nature of Merchant arising directly or indirectly out of the Agreement and /or the TeleCheck / TRS Services Agreement or any document or agreement executed and delivered by Merchant in accordance with the terms of the Agreement. The undersigned further agrees to pay to the Processor all expenses including attorney fees and court costs) paid or incurred by the Processor in collecting such obligations and in enforcing this Guaranty.

Signature  Date

**AGREEMENT APPROVAL**

**Merchant Acceptance** – Each person signing below agrees to the terms and conditions stated in the front and back of this agreement and certifies that all information provided in the application is true, correct and complete. Client acknowledges and agrees that we, our Affiliates and our third party subcontractors and/or agents may use automatic telephone dialing systems to contact Client at the telephone number(s) Client has provided in this Merchant Processing Application and Agreement and/or may leave a detailed voice message in the event that Client is unable to be reached, even if the number provided is a cellular or wireless number or if Client has previously registered on a Do Not Call list or requested not to be contacted by Client for solicitation purposes. Client hereby consents to receiving commercial electronic mail messages from us, our Affiliates and our third party subcontractors and/or agents from time to time. Each signer authorizes CardConnect LLC and/or the Member Bank or any agent of the Member Bank, to make whatever inquiries CardConnect LLC and/or the Member Bank deem appropriate to investigate, verify, or research references, statements or data, including personal credit reports for the purpose of this application. Merchant understands this agreement shall not take effect until Merchant has been approved by CardConnect LLC and/or the Member Bank and a merchant number is issued.

You further acknowledge and agree that you will not use your merchant account and/or the Services for illegal transactions, for example, those prohibited by the Unlawful Internet Gambling Enforcement Act, 31 U.S.C. Section 5361 et seq, as may be amended from time to time, or processing and acceptance of transactions in certain jurisdictions pursuant to 31 CFR Part 500 et seq. and other laws enforced by the Office of Foreign Assets Control (OFAC).

**Client certifies, under penalties of perjury, that the federal taxpayer identification number and corresponding filing name provided herein are correct.**

**SIGN YOUR AGREEMENT**

Signature   
Date

**CARDCONNECT LLC**

Application Approved By:  
Signature   
Title  Date

**WELLS FARGO BANK N.A. (A MEMBER OF VISA USA, INC. AND MASTERCARD INTERNATIONAL, INC.)**

Application Approved By:  
Signature

**PROCESSOR INFORMATION**

Name   
Address   
URL   
Customer Service (Phone)