

COMPANY DETAILS

Company Name:	
DBA (If Applicable):	
Registration Number :	
Country of Registration:	
VAT/ Tax ID / File Number:	
Street Address :	
City / Town :	
State / Province :	
Zip / Post Code :	
Country :	
Postal Address If different from above	
Address :	
Town / City :	
State / Province :	
Zip / Post Code :	
Country :	

PRINCIPAL'S INFORMATION

If more than one Principal, please attach additional page(s)

Principal's Name:	
Title and Ownership %:	% of Ownership:
Home Street Address:	
City/Town:	
State/Province-Zip/Post Code:	
Country:	
Telephone Number:	
Passport Number:	Issued In:

COMPANY CONTACT INFORMATION

Administrative Contact :	
Telephone Number :	
Email Address :	
Fax Number:	
Technical Contact :	
Telephone Number :	
Email Address :	
Fax Number:	

REFERENCES

Provide the Company Name, Contact, Address, and Phone No. of **two** (2) Business Credit References.

Reference 1 Company Name	
Contact Name / Phone Number	
Address	
Reference 2 Company Name	
Contact Name / Phone Number	
Address	

ACCOUNT PROFILE

Is your Company involved in any of the following?	(Check as appropriate)	
Internet Gaming (including Lotteries, Raffles, etc)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult Entertainment Services (including Audiotext)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult Life Style Products	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Travel Services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Software Download Services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Online Registrations or Memberships	<input type="checkbox"/> Yes	<input type="checkbox"/> No
E-Books or Online Report Products	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pharmaceutical Products	<input type="checkbox"/> Yes	<input type="checkbox"/> No
E-Wallets	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mail Order Services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Telemarketing Services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other Non-Tangible Products or Services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Tangible Products	<input type="checkbox"/> Yes	<input type="checkbox"/> No

CURRENT PROCESSING

(Check one in each column)

Are you processing now or have you ever processed credit card transactions before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will your existing Merchant Account(s) remain open?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a Processing relationship terminated? (If Yes, please explain in detail on a separate attachment.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How long have you been in business?	<input type="checkbox"/> Start Up	yrs
Current Total Annual Volume: \$	# of Employees	
	Office Space	m ²
Name of Current Processor(s)		

PROCESSING AMOUNT REQUESTED

Projected Monthly processing volume: \$	VISA %	MC %
Projected number of transactions per month :	Average Ticket:	\$

CURRENCY PREFERENCES

Please check the currency or currencies in which you would like to process:

Euro
 USD
 British Pound
 Swiss Franc
 Other:

GLOBAL DISTRIBUTION OF CUSTOMERS (Enter % for all that apply)

Asia Pacific	%	VISA EU	%
Caribbean & Latin America	%	VISA Canada	%
Central & Eastern Europe, Middle East & Africa	%	Visa USA	%

MERCHANT MARKETING AND SALES METHOD (Enter % for all that apply)

How do you offer your Products/Services?		How do you receive your Customer's Orders?	
Internet	%	Internet/SSL	%
Direct Mail/ Telemarketing	%	Mail Order / Telephone Order	%

CREDIT CARDS TO BE ACCEPTED

Please check the type(s) of credit cards which you request to be validated.

VISA
 MasterCard
 *Diners
 *Amex
 *JCB
 Other

* **Note:** The validation of these cards may not be available with all Acquiring Banks. It is the Merchant's responsibility to obtain their own account from the Issuers of these cards.

PRODUCTS, SERVICES AND WEB SITE INFORMATION

Please provide a **detailed description** of any and all goods and/or services offered.

Is this Product/Service fulfilled at the time of the sale?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If No, please state turnaround time from Order to Dispatch		
Does your company fulfill the orders directly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If No, provide fulfillment company information details below:		
Company Name:		
Address:		
Contact Name :	Phone:	

PLEASE DESCRIBE ALL FRAUD PREVENTION MEASURES THAT YOU UTILIZE:

URL REQUIREMENTS

(Check one in each column)

1. The Company's name is clearly identifiable to the Customer	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. The address of the Company is present on the web site(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. You ask for the Cardholder's address and phone number	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. CW2 Required	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. All products comply with the same MCC Code	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. The transaction currency and price of all products is clearly displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Shipping and Handling Charges are clearly displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. A statement of estimated fulfillment time of contract is displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. A statement regarding the security of the transaction is displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. A procedure regarding the return of goods is displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Your Confidentiality and/or Privacy Policy is displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Information regarding the law in each jurisdiction is provided for Customer	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13. A statement regarding your Company's shipping policy is displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14. Your web site(s) display the VISA and MasterCard logos	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15. The Descriptor (as it will appear on the Customer's statement) is displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16. Company contact details for Customer Support are clearly displayed	<input type="checkbox"/> Yes	<input type="checkbox"/> No

MEMBERSHIP OR SUBSCRIPTION BASED WEB SITES/ PRODUCTS

NON-RECURRING FEES FOR SUBSCRIPTIONS/SERVICES/MEMBERSHIPS/PRODUCTS

One (1) month :	\$
Two (2) months :	\$
Three (3) months :	\$
Other :	\$

RECURRING FEES FOR SUBSCRIPTIONS/SERVICES/MEMBERSHIPS/PRODUCTS

Introductory trial for _____ days :	\$
Recurring every _____ days :	\$
Recurring (Quarterly, Annually, etc.) _____ :	\$

WEBSITE CONTENT

(Check as appropriate)

Content on web site is provided by :

Does the web site carry a warning for minors?

Yes

No

Does the web site have pop-ups? Cross promotions?

Yes

No

PLEASE LIST ALL URL'S:

(If necessary, attach a separate page)

LOGIN - You MUST provide a non-expiring "User ID" and "Password" for your web site(s)

User ID:

Password:

DESCRIPTOR REQUESTED:

BANKING DETAILS

Please provide your **Depository Bank** Information:

Bank Name	
BIC (Bank Identifier Code)	
Bank Sort Code / Swift / Iban	
Account Holder	
Account Number	
Bank Contact & Phone Number	

Please fax the following documents with this application form:

- * Certificate of Incorporation/Commercial Register Excerpt
- * Copy of Principal's Passport/Identity Card
- * General Terms and Conditions
- * Refund and Cancellation Policy
- * Voided check from Depository Account OR Letter of Good Standing on Bank's Letterhead
- * 6 Months most recent processing statements

Name:

Title:

Place:

Signature: _____

Date: _____ , _____ , 2006

Specific Representations and Warranties

You represent and warrant at the time of this document and during the Term of this Agreement the following:

- You are not engaged in or affiliated with any businesses, products, or methods of selling other than those listed in this Application.
- No owner with voting control of the company, or with more than 5% of the shares, nor any signer of this agreement or senior officer of your organization, has been charged, arrested, or convicted within the last five years of any criminal activity.
- This Agreement violates no law, nor is it in conflict with any other agreement to which you are subject.
- The products or services you will sell and submit for processing under this Agreement are not illegal services within your jurisdiction.
- There is no action, litigation, or proceeding pending, or to your knowledge threatened which, if decided adversely would impair your ability to carry on your business substantially as now conducted or which would adversely affect your financial condition or operations.
- You have never entered into an agreement with a third party to perform credit or debit card processing services, which has been terminated by that third party, other than as identified in the Application.
- You have never entered into an agreement with a processor, bank or gateway to perform credit or debit card processing services, which has been terminated by that processor, bank or gateway, other than as identified in the Application.
- All intended transactions are bona fide. No transaction involves the use of a card for any purpose other than the purchase of goods or services from you.
- You have provided all information accurately and without omissions or misleading statements and you have not withheld any information that, if known to recipient, would influence recipient's decision to enter into this Agreement.

Important Notice before Signing This Application

The signer hereby authorizes the recipient to verify any information provided herein by the Applicant in response to the questions contained in this document and all exhibits and supporting documents provided. Recipient is authorized to use personal information provided to obtain credit reports from authorized credit reporting agencies. Investigations, consumer credit reports, and reference checking, or other reasonable and legal means of investigation, may require verification by third parties to confirm information provided by Applicant and Applicant hereby authorizes the recipient to undertake such verifications without further notice to the Applicant. The results of such investigation remain the sole property of the recipient.

Warranties of Signing Party The signing party below warrants that each of the principal owners, who collectively have majority voting control of shareholdings of the merchant company, and the Chief Executive Officer or Managing Director of the merchant company have reviewed the responses in this Application and its exhibits and supporting documents and have found no erroneous or misleading information. The signing party hereby makes the above warranties on all pages and documents submitted and in all oral statements and attests the information provided in and submitted with this application is accurate to the best of his or her knowledge as of the date of signature.

Application attested by (Authorized Signer) _____

Applicant's Printed Name _____

Authorized Signer's Title _____ Date _____