NextPay
BUSINESS SOLUTIONS

Merchant Application

Universal application — all products & solutions

Application Date:
Sales Rep / Agent:
Application ID:

APPLICATION TYPE

Type of Request * New Location Additional Location Ownership Change

PRODUCT / SOLUTION APPLIED FOR

NOTE: *Enter the product the merchant is applying for and the monthly software fee. All remaining pricing, hardware, and add-ons are finalized on the accompanying proposal.*

Product / Solution Name *	Monthly Software Fee ($) *
Number of Locations / Stations	Proposal # / Reference (if applicable)

MERCHANT INFORMATION

Is this a multi-MID deal? Yes No

DBA / Business Name *	Type of Ownership * *(Sole Prop / LLC / Corp / Partnership / Non-Profit)*
Federal Tax ID (EIN) *	Exact Legal Name *
Business Email *	Business Phone *
Website	Years in Business

DBA Address

Street Address *		Suite / Apt / Bldg #
City *	State *	ZIP *

Does the legal address differ from the DBA address? Yes No

Legal Address (if different)

Street Address		Suite / Apt / Bldg #
City	State	ZIP

MERCHANT PROFILE

Average Monthly Volume ($) *	Average Ticket ($) *	Highest Ticket ($) *
% Card Swiped / Present *	% Keyed / eCommerce *	Business Type / MCC *

Does the merchant conduct business seasonally? Yes No

If yes, active months:

OWNERS / OFFICERS

Principal #1

First Name *	Last Name *	M.I.
Title / Position *	Ownership % *	Date of Birth *
Social Security Number *	Mobile / Phone *	Email *
Gov't ID Type	ID Number	ID Exp. / Issuing State
Home Address *	Suite / Apt #	
City *	State *	ZIP *

Principal #2

First Name	Last Name	M.I.
Title / Position	Ownership %	Date of Birth
Social Security Number	Mobile / Phone	Email
Gov't ID Type	ID Number	ID Exp. / Issuing State
Home Address	Suite / Apt #	
City	State	ZIP

Is the Managing Member one of the owners listed above? Yes No

Is the Authorized Contact one of the owners / managing member above? Yes No

BANKING INFORMATION

Name of Merchant's Bank *	Routing / ABA # *
Checking / Savings Account # *	Account Type (Checking / Savings) *

PRICING & FEES

NOTE: *Final pricing is set on the accompanying proposal. Complete the fields that apply; leave the rest blank.*

Pricing Model * Flat Rate Interchange Plus Tiered Advantage / Cash Discount Other

Credit Rate (%)	Debit Rate (%)	Amex Rate (%)
Auth / Transaction Fee ($)	Batch Fee ($)	Monthly Minimum ($)
Chargeback Fee ($)	Retrieval Fee ($)	PCI / Monthly Admin Fee ($)

MERCHANT AGREEMENT TERM

Agreement Term (Number of Months) *	Notes (optional)

ACCOUNT SETUP & FUNDING

How does the merchant wish to be billed? Daily Monthly

Funding type Next Day 48 Hour Same Day

Latest time the business closes	Anticipated go-live / processing date *
Best days to contact	Best time to contact

SHIPPING INFORMATION

NOTE: *Merchant's DBA address is used for shipping by default.*

Ship to an address different from the DBA? Yes No

Ship-To Street Address		Suite / Apt / Bldg #
City	State	ZIP

Shipping Method Ground Second Day Next Day

REQUIRED DOCUMENTS

NOTE: *Attach the following. Check each item included with this application.*

Driver's License (all principals)

Voided Check or Bank Letter

SS-4 document (showing EIN #), SSN, and Date of Birth

If currently processing:

3 months credit card processing statements

If not currently processing:

3 months personal bank statements 3 months business bank statements

AUTHORIZATION & SIGNATURES

By signing below, the merchant certifies that the information provided is true and complete, authorizes NextPay Business Solutions and its processing partners to obtain credit and background information as needed, and agrees to the terms and pricing set forth in this application and the accompanying proposal.

Merchant Signature *	Printed Name *
Title *	Date *

Sales Rep / Agent Signature *	Printed Name *
Agent ID	Date *