



SA KN Software: _____ File Type: _____

An Add Location? Yes _____

Batch Name (16 digits): _____

ACH & VeriTrac Service Registration

Company Legal Name: _____ dba or location #: _____

Legal Address: _____ Service Address: _____

City, State, ZIP: _____ City, State, ZIP: _____

Main Company Phone: _____ Service Add Fax: _____

Contact Name & Title: _____ Cus Service Ph#: _____

Email for billing: _____ E-mail for Notices: _____

Batch Mgr name: _____ Ph# _____ Email: _____

Organization is: Corp Partnership Proprietor LLC Federal Tax ID :# _____

Company Owner: % of ownership: _____ Time in Business _____ Business Offers _____

Name _____ Title _____ DOB _____ SSN# _____

Residence _____ City _____ St/ ZIP _____ Phone _____

Company Owner: % of ownership: _____

Name _____ Title _____ DOB _____ SSN# _____

Residence _____ City _____ St/ ZIP _____ Phone _____

ACH Transaction Information: _____ PPD _____ RCK _____ BOC _____ WEB _____ TEL _____ CCD _____ SUNDAY

DEBIT monthly item volume: _____ Peak day volume: _____ Max. Item: \$ _____ Avg Item: \$ _____ Max. Monthly: \$ _____

CREDIT monthly item volume: _____ Peak day volume: _____ Max. Item: \$ _____ Avg Item: \$ _____ Max. Monthly: \$ _____

The following item copies must be submitted with this form for processing of your application:

- ___ 1. Voided check for the ACH deposit account, with the business name pre-printed on the check, or bank confirmation letter
- ___ 2. Drivers License copies for all persons with ownership interest.
- ___ 3. State license, MSB Filing & business organization filing (DBA, Articles of Inc., LLC or Partner Agreement, including owner list)
- ___ 4. Loan agree with ACH Pre-Authorization language for your customer signature or ACH Check Presentment Notification sample
- ___ 5. Last 3 months business bank account statements
- ___ 6. Financial statements 90 days current: balance sheet; income statement & last 2 Fed Tax Returns with year-end balance sheets
- ___ 7. If in business less than 2 year, copy of the business principals' last 2 years Fed Tax Returns and personal financial statement
- ___ 8. Advertising copy that describes your business activity
- ___ 9. Last 3 months processing history shown month by month (#debits, #credits, #total returns, #unauthorized returns), if applicable
- ___ 10. EIN (Employee Identification Number) confirmation letter from the IRS (ie: SS-4 acknowledgement letter)

Please initial that you have read and understand each of the following terms and conditions:

- ___ I understand Settlement Funds receipt is usually four business days.
- ___ I understand exclusion of any of the above requested items required for consideration of my application may void my application
- ___ I understand that I am legally responsible, per Federal Regulation E, to obtain written customer authorization to conduct an ACH.
- ___ I understand an ACH item will be returned promptly to a customer protesting the transaction, and I will not knowingly attempt to conduct an ACH after a stop-payment of a payment to my business is ordered or for an amount included in a bankruptcy filing.

Owner Signature _____ Name (printed) _____ Date _____

AGREEMENT: Applicant certifies that all information provided in this document is true and complete and that they have the authority to make this application for the company. Client hereby authorizes Advantage Payment Systems and its providers to use any and all such information to perform a review of the business for the sole purpose of the application approval process, including access to personal credit files. Advantage Payment Systems and its providers reserve the right to decline an application based on validity of information, credit scoring, financial strength, and time in business.

Privacy of Information Policy

All information provided by the applicant is considered and treated as confidential and used for the sole purpose of the application approval process. Protecting your privacy is important to Advantage ACH and our employees. The following policy serves as a standard for all Advantage ACH employees for collection, use, retention and security of nonpublic personal information related to our ACH services program.

WHAT INFORMATION WE COLLECT. We may collect "nonpublic personal information" about you from the following sources:

- Information we receive from you on applications or other forms, such as your name, address, social security number, assets and income;
- Information we receive from third parties, such as consumer and business reporting agencies regarding your personal and business credit history.

WHAT INFORMATION WE DISCLOSE. We are permitted by law to disclose nonpublic personal information to third parties in certain circumstances. For example, we may disclose all of the nonpublic personal information that we collect to providers that perform services on our behalf. Such disclosures are made as necessary to conduct and administer the services you request or authorize. Otherwise, we do not disclose nonpublic financial information about our customers or former customers or their customers to anyone, except as permitted by law or required by subpoena.

OUR SECURITY PROCEDURES We maintain physical, electronic and procedural safeguards to guard your nonpublic personal information. We restrict access to nonpublic information to our and our servicer's employees who need to know the information to provide our services to you.

**Mail: Advantage Payment Systems, 10650 Scripps Ranch Blvd #109 San Diego CA 92131
(888) 718-6767 • Fax (702) 256-0271**