CREDIT CARD PROCESSING PRE-APPLICATION FORM

Section 1 – Company Information (all fields mandatory)

This section is intended to gather information on your company who currently holds the processing contract:

- **A.** Legal Name:
- **B.** Street Address:
- **C.** City:
- **D.** Country:
- **E.** Zip/Postal Code:
- **F.** Telephone Number:
- **G.** Fax Number:
- **H.** Shop URL:
    - *This is the URL where you sell your product(s): Please name ALL URLs you operate. Use a separate sheet if necessary.*
    - *You must provide a non-expiring Username and Password for your website(s).*
- **I.** Corporate URL:
    - *This is the URL with contains corporate information of different from Shop URL*

Section 2 – Company Director Information (mandatory)

The Operations Company Director is defined as the primary legal signatory for your main Operating Company. This person would be responsible for signing the processing agreement.

- **A.** Name:
- **B.** Street:
- **C.** City:
- **D.** Zip:
- **E.** Country:
- **F.** Date of Birth:
- **G.** Email address:
- **H.** Phone Number:
- **I.** Percentage ownership in Operations company:

Section 3 – Credit Card Processing Information (mandatory)

- **A. What currency(s) do you intend to use?**
    - Euro:
    - GBP:
    - USD:
    - Others:

B. Which Credit Card(s) do you wish to process?
- o **Visa**
- o **MasterCard**
- o **Diners**

C. Current Credit Card Descriptor? (if applicable)

D. Which countries or geographic regions are you targeting?

E. Name of Current Processor(s):

Section 4 – Business Model Description
Please provide a detailed description of the goods and/or services you offer.
- What are the products and/or services?

- Who is your Target Market?

- How do you offer your products and/or services? (Internet, Direct Mail/Telemarketing)

- How do you receive your Customers' Orders?

- How do you fulfill your Customers' Orders?

- Who are your suppliers of your products and/or services? (If applicable)

Section 5 – Last six months' credit card processing data (mandatory)

A. Attach a copy of last 6 months processing statement from **existing processor**
- o *show each account separate (copies and tables below)*

B. For new businesses / shops please show the next six months forecast
- *show each account separate (please use tables below)*

Account 1:

VISA Date/Month	VISA Sales $	Sales TRX*	Charge back volume in $	Number of Chargeback TRX
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
Total	0,00	0	0,00	0

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Account 2:

MASTERCARD Date/Month	MC Sales $	SalesTRX*	Charge back volume in $	Number of Chargeback TRX
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
	0,00	0	0,00	0
Total	0,00	0	0,00	0

Name: _____   Title:_____

Signature: _____   Date: _____