

MERCHANT PROCESSING AGREEMENT

Merchant Application and Fee Schedule

8500 Governors Hill Drive
 Symmes Twp, OH 45249-1384
 Phone: 888-208-7231
 Fax: 877-822-1248

Please carefully complete the Application and read the Terms and Conditions and other additional forms, as applicable to you, which together make up the Merchant Processing Agreement. The Terms and Conditions can be viewed at <http://info.vantiv.com/NPCCMA>. Please retain the website to review the Terms and Conditions as well a copy of the Merchant Application for your records. Worldpay ISO, Inc. ("NPC") and Member Bank's acceptance of this Application will be made in a manner authorized in the Agreements and/or Terms and Conditions.

Sales Representative ID Number (9 digit or 16 digit code)

T 1 1 3 7 R 0 1 8

Bank # or Merchant Association #:

SECTION 1 MERCHANT BUSINESS INFORMATION

Business Legal Name: (Must Match Business Tax Return Name) POPLAR GROVE UTILITY DISTRICT		Contact Name: CAROL JONES	
Business Name (DBA): POPLAR GROVE UTILITY DISTRICT		<input type="checkbox"/> Check here if Corporate Headquarters	
Business Location Address: 14560 HWY 51 SOUTH		E-mail address: C.JONES@PGUD.ORG	Website: POPLARGROVEUTILITYDISTRICT.COM
City, State, Zip: ATOKA, TN, 38004		Business Billing Address: (if different from location address) PO BOX 129	
Phone #: (901) 837-0181		Phone #: (901) 837-0181	
Fax #: (901) 837-0185		Fax #: (901) 837-0185	
Federal Tax ID #: 62-0974475			

SECTION 2 BENEFICIAL/CONTROL OWNERSHIP INFORMATION

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of certain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Type of Legal Entity:	<input type="checkbox"/> Association/Estate/Trust	<input type="checkbox"/> Financial Institution	<input type="checkbox"/> Partnership	<input type="checkbox"/> SEC Registered Entity
	<input checked="" type="checkbox"/> Government (Federal/State/Local)	<input type="checkbox"/> LLC	<input type="checkbox"/> Private Corporation	
	<input type="checkbox"/> Individual/Sole Proprietor	<input type="checkbox"/> Non-Profit/Tax-Exempt (501C)	<input type="checkbox"/> Publicly-Traded Corporation	
Control Owner/Officer/Principal Name: David Braden	Title: General Manager	DOB: 3/22/1966	SSN #: 620-97-4475	Ownership Percentage 0
Home Address: 105 West Dr	City, State, ZIP: Munford, TN 38058		Phone #: (901) 837-0181	
Beneficial Owner/Officer/Principal Name: David Braden	Title: General Manager	DOB: 3/22/1966	SSN #: 620-97-4475	Ownership Percentage 0
Home Address: 105 West Dr	City, State, ZIP: Munford, TN 38058		Phone #: (901) 837-0181	
Beneficial Owner/Officer/Principal Name:	Title:	DOB:	SSN #:	Ownership Percentage
Home Address:	City, State, ZIP:		Phone #:	
Beneficial Owner/Officer/Principal Name:	Title:	DOB:	SSN #:	Ownership Percentage
Home Address:	City, State, ZIP:		Phone #:	
Beneficial Owner/Officer/Principal Name:	Title:	DOB:	SSN #:	Ownership Percentage
Home Address:	City, State, ZIP:		Phone #:	


SECTION 3 IMPORTANT DISCLOSURES

Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement Ver.GEN.0718

IMPORTANT MEMBER BANK RESPONSIBILITIES: (1) A Visa Member is the only entity approved to extend acceptance of Visa products directly to a Merchant. (2) A Visa Member must be a principal (signer) to the Merchant Agreement. (3) The Visa Member is responsible for educating Merchants on pertinent Visa Operating Regulations with which Merchants must comply. (4) The Visa Member is responsible for and must provide settlement funds to the Merchant. (5) The Visa Member is responsible for all funds held in reserve that are derived from settlement.

IMPORTANT MERCHANT RESPONSIBILITIES: (1) Ensure compliance with cardholder data security and storage requirements. (2) Maintain fraud and chargeback below thresholds. (3) Review and understand the terms of the Merchant Agreement. (4) Comply with Operating Regulations. The responsibilities listed above do not supersede the terms of the Merchant Agreement and are provided to ensure the Merchant understands some important obligations of each party and that the Visa Member (Acquirer) is the ultimate authority should the Merchant have any problems.

MEMBER BANK:
 Fifth Third Bank
 c/o Worldpay LLC
 8500 Governors Hill Drive
 Symmes Township, OH
 45249
 (866) 250-9764

Signature (Signature may be evidenced by facsimile)
 X 

Name (please print)

David Braden
 General Manager

Date

01/13/2020

Merchant's Business Name (Legal): POPLAR GROVE UTILITY DISTRICT

SECTION 4 BUSINESS PROFILE AND ASSUMPTIONS

<input type="checkbox"/> Ownership or Legal Entity Change		Close NPC Existing MID#:			Close Date Existing MID#:			Open Date: 1/1/1969		
Annual Volume (Visa/MC/DS/AX):	\$1,953,000.00	% Card Present	0	% Card Swipe	0	% Imprint (Manually Keyed)	0	% B2B	0	
Average Ticket (Visa/MC/DS/AX):	\$47.53	% Card Not Present	100	% MOTO	15	% Internet	85	% of International Cards	0	
Highest Ticket (Visa/MC/DS/AX):	\$55.00	Total	100%							
<input type="checkbox"/> Add'l. Location 1st Location MID:				<input type="checkbox"/> Never Accepted Cards <input type="checkbox"/> Processor Change - How many processing statements are you including?						
Type of Goods/Service Sold:	Utilities - Electric, Gas, Water, Sanitary			REFUND POLICY (Check One):			<input checked="" type="checkbox"/> No Refund <input type="checkbox"/> Refund in 30 days or less <input type="checkbox"/> Merchandise exchange only <input type="checkbox"/> Other			
Seasonal Sales: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Active Months: <input type="checkbox"/> JAN <input type="checkbox"/> FEB <input type="checkbox"/> MAR <input type="checkbox"/> APR <input type="checkbox"/> MAY <input type="checkbox"/> JUN <input type="checkbox"/> JUL <input type="checkbox"/> AUG <input type="checkbox"/> SEP <input type="checkbox"/> OCT <input type="checkbox"/> NOV <input type="checkbox"/> DEC								

SECTION 5 COMPLIANCE INFORMATION

Do you (MERCHANT) have a <input checked="" type="checkbox"/> 3rd party software application/gateway or <input type="checkbox"/> POS Terminal		Are you compliant with the Payment Card Industry Data Security Standards? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
If yes, identify Security Assessor and certificate number:		Last Certification Date:		
Have you been notified by Visa, MasterCard or Discover that you have been the victim of a compromise of cardholder data? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		If yes, have you completed remediation? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Third Party Software/Gateway Vendor Name and Address:		Do you store cardholder data? Paper - <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Electronic - <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Version #		Third Party Software/ Gateway Vendor Contact Information:		
Does software store cardholder information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Merchant data to which this vendor has access:		
		Is Third Party Software/Gateway PCI DSS and/ or PA DSS Compliant ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

All merchants must comply with the Payment Card Industry Data Security Standard ("PCI DSS"). Merchant is required to maintain the security of card data and to comply with the requirements of the PCI DSS. Merchant must validate its compliance with the PCI DSS and provide NPC with evidence that Merchant (a) has successfully completed a Self Assessment Questionnaire and scan(s), if applicable, and (b) is compliant with the PCI DSS. NPC has created the PCI Program (the "PCI Program") to assist merchants in securing card data and complying with PCI DSS. You are enrolled in the PCI Program and the applicable fees will be assessed in accordance with the terms of the PCI Program. Information on the PCI Program is set forth in Section 15 of the Terms and Conditions and the applicable fees are set forth in Section 11. All gateway or other vendor supplied software must be compliant with the Payment Application Data Security Standard rules ("PA DSS").

SECTION 6 MERCHANT BANK ACCOUNT INFORMATION

In accordance with the terms set out in the Merchant Processing Agreement, funds will be transferred to/from the account as delineated. If nothing is checked, MERCHANT will receive Premium ACH. ACH can be performed by the following entities: Member Bank, NPC or any authorized agent of NPC or any Third Party Service Provider with whom you have contracted. *Subject to special approval

Deposit Time Frame: Premium ACH Alternate Funding* Deposit Type: Combined By Batch

Any ACCOUNT NUMBER indicated must be a valid account number for handling ACH deposits and withdrawals. If more than one account is indicated, account #1 will be used for Sales.

Routing #1:	0	8	2	9	0	0	4	3	2	DDA Account Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
Account #1:	9	2	1	1	2	8	6	2		
Routing #2:	DDA Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings									
Account #2:	If a second account, this account is used for: <input type="checkbox"/> Discount <input type="checkbox"/> Fees <input type="checkbox"/> Credits <input type="checkbox"/> Chargebacks									

Section 7 CHECK / ACH SERVICES

If Check Services are selected and by signing Merchant Processing Agreement, Merchant agrees to accept Check Services pursuant to, and to be bound by, the terms and conditions for Check products acceptance as stated in the Merchant Processing Agreement or as provided by Check services provider, SPS-EFT, or other service provider. Member Bank is not providing the Check/ACH Services. Merchant must be approved by NPC and its service provider, SPS-EFT, or by other service provider.

++ For Non-Guarantee checks \$10,000 and greater: A premium of 0.10% (ten basis points) will be charged in addition to the discount rate.

***These fees apply per account.

Check Service	Discount Rate	Transaction Fee	Check Service	Discount Rate	Transaction Fee	Other Check21 Fees	
Check Conversion <input type="checkbox"/> w/ Guarantee			<input type="checkbox"/> Check21 POS - Guarantee	0.00	0.00	Check21 Return Fee***: \$ 5.00	
Check Conversion <input type="checkbox"/> w/o Guarantee			<input type="checkbox"/> Check21 POS - Non-Guarantee**	0.00	0.00	Monthly Check21 Access Fee***: \$ 5.00	
Paper Check w/ <input type="checkbox"/> Guarantee			<input type="checkbox"/> Check21 Remote - Guarantee				
			<input type="checkbox"/> Check21 Remote - Non-Guarantee**				
			<input type="checkbox"/> Check21 POS Payroll option - Guarantee: Discount Rate + 3% premium			<input type="checkbox"/> Monthly Billing	
			<input type="checkbox"/> Check21 POS Payroll option - Non-Guarantee: Discount Rate + 1% premium				
# of Checks Monthly:	Average Amount:	Largest Check Amount:	Monthly Service Fee***:	Batch Fee:	Monthly Minimum***: \$25.00	Annual Fee***: \$59.95	Termination Fee***: \$125.00

Merchant's Business Name (Legal): POPLAR GROVE UTILITY DISTRICT

SECTION 8 FEE SCHEDULE

APPLICATION TYPE: Tiered* Flat Rate* Interchange* Cash Advance
 DISCOUNT: Daily Monthly
 CARD OPTIONS: All Cards Other Cards Debit Card Only
 BUSINESS TYPE: Retail Restaurant Mail/Telephone Order* Internet*
 SUB BUSINESS TYPE: Retail Key Entered* DialPay Capture* MOTO/CardSwipe* Large Ticket

VISA/MASTERCARD/DISCOVER (V/MC/D) Rate Category	Discount Rate	Transaction Fee	AMERICAN EXPRESS Rate Category*	Discount Rate	Transaction Fee
Base	2.25 %	\$ 0.20	Base	2.99 %	\$ 0.20
Mid-Qualified ¹ <small>(Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants)</small>	+ %	+ \$	Mid-Qualified ¹	+ 0.00 %	+ \$ 0.00
Non-Qualified ²	+ 0.06 %	+ \$ 0.00	Non-Qualified ²	+ 0.76 %	+ \$ 0.00

Base Debit NON PIN-Based ³ <small>(Same as V/MC/D Discount Rate if left blank)</small>		Miscellaneous Product Fees			
<input type="checkbox"/> Debit PIN-Based ⁴	Regulated Only ⁵ <input type="checkbox"/>	Monthly Hosting Fee \$	%	\$	
Qualified Rewards ⁵		Same as Visa/MC/Discover Transaction Fee	%	\$	

Quantity	Setup Fee	Monthly Hosting Fee	Transaction Fee	Batch Fee
	\$	\$	+ \$	\$ 0.00
	\$ 59.00	\$ 8.00	+ \$ 0.00	\$ 0.00

TIERED MERCHANTS ONLY - Commercial Card transactions that do not meet the requirements to qualify for preferred rates will be assessed an additional fee of 0.50% (0.0050) on such sales volume. *Regulated applies to all Base NON PIN debit transactions from issuers that are not exempt pursuant to 12 CFR Part 235. NON PIN debit transactions from exempt issuers will fall under the Base V/MC/D discount rate. If a rate is identified but the Regulated Only box is not checked, then this rate applies to all Base NON PIN debit transactions. **If the Retail Key Entered/MOTO/Internet/DialPay Business Type is selected, Rewards cards will be charged discount rates plus 0.11% (0.0011) on all transactions. NPC's processing fees and Card Brand interchange fees are included in the discount rate. All other Card Brand fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

INTERCHANGE MERCHANTS ONLY - CARD ORGANIZATION FEES: Visa, MasterCard and Discover Interchange fees, assessments and other fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

FLAT RATE MERCHANTS ONLY - CARD ORGANIZATION FEES: All fees are included in discount rate and transaction fee above except fees related to International transactions. Does not apply to American Express.

AMERICAN EXPRESS - Existing American Express Number YES NO If Yes, Existing American Express Account Number: Annual Estimated or Actual American Express Volume is less than \$1,000,000.00 YES NO If No, Merchant is not eligible for the American Express Program.
 By checking this box, Merchant elects to opt out of the American Express Program
 By checking this box, Merchant elects to opt out of receiving American Express Marketing Materials.

SECTION 9 OCCURRENCE FEES

Batch Fee ^{††}	\$0.00 /per batch	<input type="checkbox"/> MyMerchantData.com	\$0.00 /month	<input type="checkbox"/> PCI Program Fee - Annual ⁴	\$0.00 /annual
ACH DBA Change Fee	\$25.00 /each	<input type="checkbox"/> Minimum Bill	\$0.00 /month	<input checked="" type="checkbox"/> Paper Statement	\$0.00 /month
On File Fee	\$4.00 /month	<input type="checkbox"/> Group Annual	\$0.00	<input type="checkbox"/> Regulatory and Compliance Fee ⁵	\$0.00 /annual
Card Brand Usage Fee (NABU) - MasterCard ²	\$0.06 /each	<input type="checkbox"/> Semi Annual Fee	\$0.00	<input checked="" type="checkbox"/> PCI Program Fee - Monthly ⁴	\$8.95 /month
Card Brand Usage Fee (NABU) - Visa ²	\$0.06 /each			<input type="checkbox"/> Advantage Buyer Program ³	\$0.00 /month
Retrieval Request	\$15.00 /each	<input type="checkbox"/> Merchant Training	\$0.00 /once	PCI DSS Non-Validation Fee	\$19.95 /each
Voice Authorization Fee	\$1.95 /each	<input type="checkbox"/> Welcome Kit	\$0.00 /once	IVR Authorizations	\$0.00 /each
Chargeback Fee	\$25.00 /each				

Return ACH(s) are subject to a \$25.00 fee for each occurrence.
^{††}Same as V/MC/D base transaction fee if left blank; if base V/MC/D transaction fee is left blank, the fee is \$0.30.
¹The initial term of the Merchant Agreement is 3 years and automatically renews for additional 2-year periods. If this Agreement is terminated prior to the expiration of the initial term or any renewal term, you will be subject to an Early Deconversion Fee ("EDF") in accordance with the terms of Section 7.B of the Terms and Conditions. If limited by state law, these fees may be modified in accordance with Section 7B of the Terms and Conditions.
²The Card Brand Usage Fee (NABU) includes the MasterCard Network Assessment and Brand Usage Fee, the Visa Acquirer Processing Fee, and the Visa Base II Transaction Fee and applies to Tiered Merchants Only.
³See Schedule I of the Terms and Conditions for additional information.
⁴Merchant may be charged a PCI Non-Compliance fee of \$19.95 per month per MID. Please refer to Section 6.G of the Terms and Conditions
⁵See Section 13 of the Terms and Conditions for additional information.

Merchant's Business Name (Legal): POPLAR GROVE UTILITY DISTRICT

SECTION 10 UNLIMITED PERSONAL GUARANTY AND CREDIT INFORMATION AUTHORIZATION

PERSONAL GUARANTEE: In exchange for NPC's and Member Bank's acceptance of this Merchant Agreement, each person signing immediately below this paragraph (each such person, a "Guarantor") is signing this Merchant Agreement as a Guarantor of the Merchant identified on page 1 of the Merchant Agreement. By signing below, each Guarantor (i) accepts and agrees to be bound by the Continuing Unlimited Guaranty provisions starting in Section 11 of the Terms and Conditions, and (ii) acknowledges and confirms that, prior to signing, he or she received and read those Continuing Guaranty provisions. Each Guarantor individually authorizes NPC, Member Bank, and/or either of their representatives to conduct an initial and ongoing comprehensive credit investigation of him or her by utilizing a third-party credit reporting agency and/or to obtain a criminal background check. Guarantor acknowledges receipt of the Merchant Agreement, which is incorporated herein by reference as if fully set forth herein and has reviewed the Continuing Unlimited Guaranty provisions therein.

Authorized Signature of Guarantor: (Do Not Include Title)	Guarantor Name:	Date of Signature:
Home Address	City, State, ZIP:	
Date of Birth:	Social Security Number:	Phone #:

SECTION 11 PATRIOT ACT AND BACKGROUND AUTHORIZATION


To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person (including business entities) who opens an account. What this means for you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. The undersigned entity(ies) and individuals hereby unconditionally authorize NPC and Member Bank or its agents to (i) investigate the information and references contained herein, and to obtain additional information about the Merchant and such individual(s) by pulling credit bureau and criminal background checks on the Merchant and its principals, including obtaining reports from consumer reporting agencies on individuals signing below as an owner or general partner of Merchant, or providing their Social Security Number on the Application (if such individual asks NPC or Member Bank whether or not a consumer report was requested, NPC and/or Member Bank will tell such individual and, if NPC and/or Member Bank received a report, NPC and/or Member Bank will give the individual the name and address of the agency that furnished it) and (ii) update such information periodically throughout the terms of service of the Merchant Agreement. By providing your SSN and signing this Application, you, in your individual capacity, unconditionally authorize NPC and Member Bank to obtain your consumer credit report.

SECTION 12 MERCHANT ACKNOWLEDGEMENTS AND SIGNATURE

Merchant agrees to and accepts the terms and conditions set forth in this Application and the Terms and Conditions which are incorporated herein by reference (GEN.0718) as if fully set forth herein (collectively, the "Merchant Agreement") and acknowledges receipt of all parts of the Merchant Agreement. Merchant acknowledges that no handwritten changes have been made to the printed text of the Merchant Agreement and that the parties may produce and rely on a copy or electronically stored image of the Merchant Agreement for all legal purposes. Merchant represents, warrants and certifies to NPC and Member Bank that it has reviewed all pages of this Application, that all information provided herein is true, correct and complete and that NPC and Member Bank may rely on the information contained in this Application, without further investigation, for all purposes. Merchant acknowledges and agrees that NPC and Member Bank are in no way responsible or liable for the actions, inactions, performance or lack of performance of any third party provider or independent sales representative. Merchant represents that it has chosen for itself any services, equipment or third party selected in connection with the Merchant Agreement, and it has not relied on any promises, representations, warranties, or covenants of the independent sales representative, NPC or others. Merchant acknowledges and agrees that the Merchant Agreement shall not be altered by any prior, contemporaneous or subsequent oral representations made by any party. Merchant further authorizes the release of Merchant information in accordance with the provisions of Section 10 of the Terms and Conditions. If Merchant does not want to participate in the American Express Program, the applicable Opt Out Box has been marked.

IN WITNESS WHEREOF Merchant has caused this Agreement to be executed by its duly authorized representative effective in accordance with the terms of the Terms and Conditions. The Agreement shall be binding upon Merchant upon the earlier of Merchant's execution below or Merchant's first processed electronic transaction.

MERCHANT

Signature (Signature may be evidenced by facsimile) X 	Name (please print) David Braden General Manager	Date 01/13/2020
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Merchant's Business Name (Legal): POPLAR GROVE UTILITY DISTRICT

SECTION 13 EQUIPMENT SETUP PROVIDER CODE: NPC = NPC to ship equipment SOF = Sales office to ship equipment MER = Merchant owned

TERMINAL	QTY	PROVIDER CODE	PRINTER	PROVIDER CODE	PIN PAD	PROVIDER CODE
POS Software or Gateway	1	MER			<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	

Other: _____ Provider Code: _____ Other: _____ Provider Code: _____ Other: _____ Provider Code: _____

EQUIPMENT SOFTWARE INFORMATION	SOFTWARE NAME AUTHORIZE.NET	PUBLISHER AUTHORIZE.NET	VERSION (ALL)
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EQUIPMENT OPTIONS THE DEFAULT SELECTION WILL BE APPLIED FOR ANY OPTION NOT SELECTED BELOW

<input type="checkbox"/> RETAIL/MOTO AVS <input type="checkbox"/> YES <input type="checkbox"/> NO Last 4-Digits <input type="checkbox"/> YES <input type="checkbox"/> NO CVV 2 <input type="checkbox"/> YES <input type="checkbox"/> NO Purchase Card/Level 2 <input type="checkbox"/> YES <input type="checkbox"/> NO Invoice # Prompt <input type="checkbox"/> YES <input type="checkbox"/> NO PBX Code <input type="checkbox"/> 8 <input type="checkbox"/> 9 Multi-Merchant <input type="checkbox"/> YES <input type="checkbox"/> NO First Merchant MID _____	Auto-Close++ <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TIME 1930 Store N Forward <input type="checkbox"/> YES <input type="checkbox"/> NO Pre-Dial <input type="checkbox"/> YES <input type="checkbox"/> NO Cash Back <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Debit Cash Back Max Amount <u>0</u> ++ Auto-Close Time for Alternate Funding needs to be no later than 7:30 p.m. CST	<input type="checkbox"/> RESTAURANT Tips <input type="checkbox"/> YES <input type="checkbox"/> NO Servers <input type="checkbox"/> YES <input type="checkbox"/> NO Tables <input type="checkbox"/> YES <input type="checkbox"/> NO Bar Tab <input type="checkbox"/> YES <input type="checkbox"/> NO Suggested Tip <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> FAST PAY (FPS) <input type="checkbox"/> Both receipts signature line <input type="checkbox"/> Both receipts NO signature line <input type="checkbox"/> NO receipts under \$25.00	<input type="checkbox"/> CASH ADVANCE <input type="checkbox"/> LODGING FUEL <input type="checkbox"/> YES <input type="checkbox"/> NO PASSWORD All <input type="checkbox"/> YES <input type="checkbox"/> NO Void <input type="checkbox"/> YES <input type="checkbox"/> NO Return <input type="checkbox"/> YES <input type="checkbox"/> NO Settlement <input type="checkbox"/> YES <input type="checkbox"/> NO Other _____
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Custom Header / Footer: _____ Wireless ID: _____
 Comments: _____

EQUIPMENT SHIPPING INSTRUCTIONS Required ONLY if ordered through NPC - Default shipping options (indicated by *) will be applied for any option not selected below

Ship To: Do Not Ship Merchant Location * ISO Location Other 1-3 Day Over Night Ground Saturday
 Priority *
 Attn: _____ Payment For Equipment Will Be:
 Lease Check Cash Visa MC
 Discover Amex 30 day (Bill Group)
 Address: _____
 City: _____ State: _____ Zip: _____ Phone #: _____
 Special Instructions:
 NPC TO REPROGRAM/TRAIN MERCHANT? YES NO
 NPC TO SHIP WELCOME KIT? YES NO

WELCOME KIT SHIPPING INSTRUCTIONS Required if welcome kit is shipping to separate address from above

Ship To: Merchant Location * ISO Location Other
 Address: _____ City: _____ State: _____ Zip: _____
 Attn: _____ Phone #: _____

SECTION 14 SITE INSPECTION INFORMATION

I represent and warrant that the information set forth in the application is true and accurate to the best of my knowledge. In addition, I hereby certify that (check which applies):

<input checked="" type="checkbox"/> I have physically inspected the business premises of the merchant at this address, personally confirmed the identity of the person listed in the Control Owner/Officer Information Section, and witnessed their signing of the Agreement. <input type="checkbox"/> An NPC approved third party site inspection vendor will supply inspection within 15 days of my signature below or I have informed NPC that a site inspection is needed. <input type="checkbox"/> I have not physically inspected the business premises of the Merchant; but have verified the validity of the business using outside sources and confirmed the identity of the person listed under the Control Owner/Officer Information Section.	Business / Inventory / Shipments: Does business appear as represented? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Is business open and operating? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Is inventory sufficient for business type? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Are goods and services delivered at the time of sale? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Goods and services charged to credit card on <input checked="" type="checkbox"/> Order <input type="checkbox"/> Shipment Are good and services delivered <input type="checkbox"/> Digitally <input type="checkbox"/> Physically <input checked="" type="checkbox"/> Both If goods are shipped, is a Fulfillment House used? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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If Fulfillment House is used, please complete the following:
 Fulfillment House Name and Address: _____ Fulfillment House Contact Information: _____
 Is Fulfillment House PCI DSS Compliant? YES NO % of shipments by this vendor _____

Location Type: Retail Store Front Office Building Residence Industrial Building Trade Show
 Sales Organization: IMPACT PAYSYSYEM LLC Sales Rep Signature: _____ Application Date: 11/25/2019