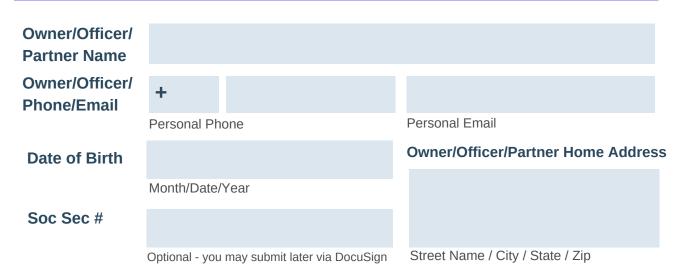


## MERCHANT APPLICATION QUICK SETUP

## **BUSINESS INFORMATION**

Business				
Name	DBA or Tra	de name on your signage	Corporate L	egal Business Name
	DDA OF HAU	ie name on your signage	Corporate L	-
Business				Years in Business
Location				
Address				
	Chus at Mars			
	Street Name	e / City / State / Zip		
Business				
Туре	Retail/Restaurant leum/Healthcare/	/Service/Gov't/Lodging/Supermarket/Petro		rop/S-Corp/C-Corp/Non- artnership/Gov't/Other
Business				
Phone/Email	+			
Phone/Email	Business Pl	none	Business Er	nail
Business				
Website				Average Ticket &
	Leave blank	if none		Volume
Federal				
Tax ID				
-	If Sole Prop you may use your SS #			Estimated Average
Business				Credit/Debit Card Ticket
Mailing				
Address				
AUUI 53				Estimated Annual VS/MC/AMEX/DISC Volume
	If different from location address - otherwise leave blank			

## **OWNER INFORMATION**



PLEASE PROVIDE A COPY OF DRIVERS LICENSE, VOIDED CHECK OR BANK LETTER, PROCESSING STATEMENTS AND BANK STATEMENTS