

**BUSINESS INFORMATION****Business  
Name**

DBA or Trade name on your signage

Corporate Legal Business Name

**Business  
Location  
Address**

Street Name / City / State / Zip

**Years in Business****Business  
Type**

Retail/Restaurant/Service/Gov't/Lodging/Supermarket/Petroleum/Healthcare/Education/Other

Individual/Sole-Prop/S-Corp/C-Corp/Non-Profit/LLC/LLP/Partnership/Gov't/Other

**Business  
Phone/Email**

Business Phone

Business Email

**Business  
Website**

Leave blank if none

**Average Ticket &  
Volume****Federal  
Tax ID**

If Sole Prop you may use your SS #

Estimated Average  
Credit/Debit Card Ticket**Business  
Mailing  
Address**

If different from location address - otherwise leave blank

Estimated Annual  
VS/MC/AMEX/DISC Volume**OWNER INFORMATION****Owner/Officer/  
Partner Name****Owner/Officer/  
Phone/Email**

Personal Phone

Personal Email

**Date of Birth**

Month/Date/Year

**Owner/Officer/Partner Home Address****Soc Sec #**

Street Name / City / State / Zip

**Notes**

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

# PCBancard

## Free Equipment Program



Dejavoo P1

Dejavoo P3

## NOTICE!

Due to shortages in the industry, PCB reserves the right to replace the equipment with another at time of shipment

BE IT KNOWN that for good consideration the undersigned parties make the following additions or changes a part of said contracts as if contained therein:

NOW THEREFORE, PCBancard (PCB) and the Party (Merchant) agree as follows:

1. Merchant agrees that the Equipment is the property of PCB, is being licensed to Merchant, and must be returned in good and working condition within ten (10) days of the expiration of the Merchant Processing Agreement with PCB which is three (3) years from initial date of Contract unless Merchant continues to process with PCB after expiration date of Contract, thereafter terminal must be returned in good and working condition within ten (10) days of cancellation. If equipment is not returned within ten (10) days Merchant agrees to pay the equipment value of (\$895.00) for each terminal under this agreement.

**No Equipment will be accepted back from Merchant who fails to complete the full term of written Processing Agreement.**

2. **\*Terminal Protection Warranty:** PCB will extend the original manufacturer's warranty under the same terms and conditions of the original manufacturer's warranty for as long as Merchant continues to process with PCB.

DBA Name of Merchant \_\_\_\_\_

☐ P1: All merchants will be charged a \$14.95 Monthly Warranty for the P1 Terminal, and \$10.00 per month Basic Portal Access Fee.

☐ P3: All merchants will be charged a \$19.95 Monthly Warranty for the P3 Terminal, and \$10.00 per month Basic Portal Access Fee.

Merchant hereby authorizes PCBancard to ACH their bank account for **\$24.95 for the P1** or **\$29.95 for the P3** to cover the cost of the monthly warranty and portal access fee.



### \*For Internal Use Only\*

Terminal Model: \_\_\_\_\_

Serial #: \_\_\_\_\_

Date Shipped: \_\_\_\_\_

Except as herein otherwise expressly provided, the Merchant Agreement, as heretofore amended, shall remain in full force and effect.

INDIVIDUAL GUARANTY (NO TITLES) I/We hereby guarantee to PCB, their successors and assigns, the full, prompt and complete performance of Merchant and all Merchant's obligations under this Agreement, including, but not limited to all monetary obligations arising out of Merchant's performance or nonperformance under this Agreement, whether arising before or after termination of this Agreement. The undersigned, by signing below, agrees to be bound by the Agreement and this Guaranty.

Personal Guarantor Signature

Date

Print Name

Owner/Officer Signature

Date

Account Executive Signature

Rep ID#



Merchant DBA

Address

Phone

Terminal Type

Quantity Price (each)

Total (excluding sales tax)

All accounts will be charged \$  monthly fee  
per terminal

### Equipment Purchase Agreement

I, the undersigned, agree and understand that I will be billed via electronic ACH for this purchase. I authorize the ACH to be processed from the bank account I have on file with PCBancard.

Signature of Authorized Signor

Date

Printed Name of Authorized Signor

### Sim Cards for Wireless Terminals

**Activation Fee: \$15.00**

**Monthly Fees based on Data Allowance**

Choose Plan:

- |                          |        |         |
|--------------------------|--------|---------|
| <input type="checkbox"/> | 1 MB   | \$7.50  |
| <input type="checkbox"/> | 10 MB  | \$16.50 |
| <input type="checkbox"/> | 100 MB | \$29.95 |
| <input type="checkbox"/> | 1 GB   | \$44.95 |

I, the undersigned, agree and understand that I will be billed via ACH, monthly, for these fees. I authorize the ACH to be processed from the bank account I have on file with PCBancard.

Signature of Authorized Signor

Date

Printed Name of Authorized Signor



420 Boulevard Suite 206 Mountain Lakes, NJ 07046

### **PCB Download Sheet**

DBA Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Agent Name: \_\_\_\_\_

PCB Internal Use

TSYS ☐

FISERV (FD) ☐

Other ☐ \_\_\_\_\_

Terminal Type: ☐ P1 QTY \_\_\_\_ ☐ P3 QTY \_\_\_\_ ☐ P5 QTY \_\_\_\_

☐ QD1 QTY \_\_\_\_ ☐ QD2 QTY \_\_\_\_ ☐ QD4 QTY \_\_\_\_ ☐ QD5 QTY \_\_\_\_

☐ S300 QTY \_\_\_\_ ☐ OTHER \_\_\_\_\_ QTY \_\_\_\_

POS Type: ☐ HotSauce POS ☐ Dejapaypro POS ☐ OVVI POS

☐ Union POS ☐ Tabit POS

SVC Fee % \_\_\_\_\_ (For Dual Pricing)

File Build Type: ☐ Retail ☐ Retail w/Tip ☐ Restaurant

Auto Close (time if required) \_\_\_\_\_ ☐ AVS ☐ CVV2 ☐ EBT

☐ IP ☐ WiFi ☐ Mobile Data (Sim Card)

Ship to: ☐ Merchant ☐ Agent

Additional Notes:

**PCBancard**

420 Boulevard, Suite 206  
Mountain Lakes, NJ 07046  
Phone: (973) 324-2251  
Fax: (973) 201-1036



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## PCI COMPLIANCE MERCHANT AGREEMENT

PCBancard is offering to assist the Merchant in completing the PCI compliance questionnaire, as we know it can be confusing and tedious under the following conditions:

1. **\*\*Hold Harmless Agreement\*\***: The Merchant agrees to hold PCBancard harmless from any liability, loss, or damage of any kind arising from the assistance provided.
  2. **\*\*Indemnification\*\***: The Merchant will indemnify PCBancard against any losses or claims related to the support given in obtaining PCI compliance.
  3. **\*\*Merchant's Responsibility\*\***: It is acknowledged that the responsibility for achieving PCI compliance lies solely with the Merchant. PCBancard will assist.
  4. **\*\*Nature of Assistance\*\***: PCBancard's assistance is intended to help the merchant facilitate compliance but does not constitute a guarantee of accuracy or completeness regarding the Merchant's specific circumstances. PCBancard makes no representation or warranty that the services provided are adequate to ensure compliance, as there are factors beyond their knowledge or control that may affect the Merchant's business. PCBancard's assistance is at no cost to any merchant PCBancard will assist in good faith.
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Business Name

Owner Signature

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Date

Owner Name (Printed)



***Dual Pricing Charity Program***

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Business Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Owner Signature: \_\_\_\_\_

***Charity of Choice***

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Charity Name: \_\_\_\_\_

Charity Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website: \_\_\_\_\_

Would you like signage for your business to let your customers know a portion of the fees associated with your credit card processing goes to the above listed charity?

Yes / No