



Business Profile for Mercury's credit card processing

Please Note: The information in this form will be used by Mercury to begin its underwriting process and is not a guarantee of acceptance which may only occur upon your review and completion of a card services application and agreement and acceptance of same by Mercury and/or its processor and member bank. By submitting this form and any supporting documents, YOU HEREBY AUTHORIZE MERCURY TO OBTAIN AND USE YOUR INDIVIDUAL AND BUSINESS CREDIT REPORTS AS PART OF ITS UNDERWRITING PROCESS FOR REVIEW OF AN APPLICATION AND ESTABLISHMENT OF A CARD SERVICES AGREEMENT FOR CARD PROCESSING SERVICES. All information in this form will be treated as confidential and used only in accordance with Mercury's Privacy Policy available at <http://www.mercurypay.com/privacy-policy>

Business/DBA Name: _____ Legal Business Name: _____

Address: _____ Address (with IRS): _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

Phone/Cell: _____ Fax: _____ Phone: _____ Fax: _____

Contact Name at DBA: _____ Contact Name at Legal: _____

Website: _____ E-Mail: _____

Mailing/Billing Address: Use DBA Use Legal Other _____

Primary Owner/Officer Name: _____

Social Security Number: _____ Date of Birth: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Years at this address: _____ Own Rent

Business Type: Sole Proprietor Partnership Corporation LLC Tax Exempt

Estimated Average Ticket: \$ _____ Estimated Annual Visa/MC/Discover Sales: \$ _____

Federal Tax ID #: _____ Total number of locations: _____

Products/Services Sold: _____ Years Business Owned: _____

Anticipated Date to begin processing: _____

Application for the following card services:

- Visa/MasterCard/Discover
- American Express (existing AMEX merchant # _____)
- PIN-Based Debit
- EBT / Food Stamps (FNS # _____)

What email or fax number would you like us to send your application to? _____

What is the best way to contact you? DBA Phone Cell Phone Email

Point of Sale System: _____ Dealer Name/Phone: _____

Do you have a PC or a Mac? _____

PLEASE ATTACH A VOIDED PRE-PRINTED BUSINESS CHECK AND RETURN BY MAIL OR FAX TO:

John Baldwin

Phone: 970-335-5353 | Fax: 970-335-5885 | jbaldwin@mercurypay.com

****This is not the final step in the process. Mercury will take this info and send an application to you for your review. Your processing account can be set up two days after you return your signed official application.**