



Services by Cardservice International

First Data - Merchant Information

Store Name (DBA): <input type="text"/>	Legal Business Name: <input type="text"/>
Location Address: <input type="text"/>	Billing Address: <input type="text"/>
City, State, Zip: <input type="text"/>	City, State, Zip: <input type="text"/>
Location Phone: <input type="text"/>	Location Fax: <input type="text"/>
Federal Tax ID (EIN): <input type="text"/>	Email address: <input type="text"/>
Date Business Started: <input type="text"/>	Legal Status (corporation, LLC, sole proprietorship): <input type="text"/>
Average Ticket and Monthly Credit Card Volume: <input type="text"/>	Return Policy: <input type="text"/>
Sales Method: % Swiped, % Mail, % Phone: <input type="text"/>	Sales Method: % Web Shopping Cart: <input type="text"/>
Products / Services Sold: <input type="text"/>	<input type="text"/>
Owner/Officer/Signer Legal Name: <input type="text"/>	Signer Drivers License Number: <input type="text"/>
Signer Social Security Number: <input type="text"/>	Has the Signer ever declared bankruptcy? <input type="text"/>
Signer % Ownership: <input type="text"/>	Signer Title: <input type="text"/>
Signer Home Phone: <input type="text"/>	Signer Date of Birth: <input type="text"/>

Signer Home Address:

City, State, Zip:

2nd Signer – Required if 1st Signer owns less than 51% of the business

2nd Signer - Drivers License Number:

2nd Signer Social Security Number:

Has the 2nd Signer ever declared bankruptcy?

2nd Signer % Ownership:

2nd Signer Title:

2nd Signer Home Phone:

2nd Signer Date of Birth:

2nd Signer Home Address:

City, State, Zip:

Discover Merchant Account Number

AMEX Merchant Account Number

Send completed form to Mike Gilmore:

**Fax: 530-325-2795 or
gilmore@cardservicegigharbor.com**