

UCI Central Cashier Payment Card Services
PAYMENT CARD SETUP FORM

INSTRUCTIONS: Use this form to request a new Merchant ID and/or Credit Card Terminal. E-Commerce merchants must also complete a Request for Third Party Payment System. Please return all completed documentation to the: Central Cashier, Payment Card Services, ZOT Code 1975. Please note that all employees involved in credit card processing must abide by the Payment Card Industry Data Security Standard (PCI DSS). Training that covers this standard is required annually. For more information contact merchantservices@uci.edu.

DEPARTMENT INFORMATION

For departments requesting to become a new merchant, the information below will appear on the customer's credit card statement.

Current Date:	
Department Name:	
Contact Person:	
Contact Phone & Email:	
Merchant (D.B.A.) Name:	
Published Address:	
Customer Service Phone Number:	

TYPE OF REQUEST

How will your department process credit cards?	Retail (In-Person)	Mail/Telephone (MOTO)	e-Commerce
How soon does this setup need to be completed?	Regular (2-3 weeks)	Rush (1-2 weeks, \$75 charge)	

EQUIPMENT NEEDED

Type of Equipment Requested?	Terminal	Pin Pads	Wireless Terminal
If requesting terminals, number needed:	# of Terminals	# of Pin Pads	# of Wireless Units

BUSINESS JUSTIFICATION

Type(s) of Services	Merchandise Sales	Registration Fees	Application Fees
	Ticket Sales	Donations	Other

Please specify if "other" is checked:	
If selling merchandise, is sales tax being collected? If not, why? If so, how is it being recorded?	

MERCHANT INFORMATION

Card Types Accepted:

Visa

MasterCard

Discover

American Express

If requesting to become a new merchant, please answer the following questions below:

Are you an existing merchant with Bank of America Merchant Services (BAMS)? If so, please specify the BAMS MID number.	
Is this a new merchant setup?	
Is a gateway setup with Authorize.Net required?	
For new merchant setups, what is the average ticket amount?	
For new merchant setups, what is the annual volume?	
If accepting e-Commerce payments, what is the URL address?	

REQUESTING DEPARTMENT APPROVAL

Department Head's Name and Phone	
Signature and Date	

PAYMENT CARD SERVICES APPROVAL

Reviewed By (Payment Card Services)	
Signature	
Asst. Vice Chancellor, Accounting & Fiscal Services	
Signature	

PLEASE DO NOT WRITE BELOW THIS LINE

Root or Chain	MID	TID	Nashville MID
BAMS			
AMEX			
Discover			