



Merchant Advisory Services

New ISC/Agent Paperwork Checklist

Business or Individual Name: _____

Date: _____

- ☐ Completed and Signed ISC Application representing a majority of ownership. (all required fields marked with an * must be complete)
- ☐ Completed and signed Independent Sales Contractor Agreement. (The first and last page must be completed and signed and all pages returned).
- ☐ Business License on all applicable DBA Names. (not required on sole proprietors) If you have a DBA name and are completing these forms with that name and not your individual name you must have a business license and you must submit a copy of it with this package even if your state does not require you to have a business license.
- ☐ Signed copy of Pricing Schedule A.
- ☐ Signed copy of Activation Bonus Schedule (if applicable).
- ☐ Completed and signed ACH Authorization Form. (This form is not completed by your bank, it is filled out and signed by you).
- ☐ Copy of Voided Check or bank letter. (Starter checks are acceptable but must have individual/business name, address, city, state and zip)
- ☐ Drivers License. (Required for all owners representing a majority ownership)
- ☐ Completed and signed W-9. (Form must be for 2014, the most current Government issued form. A tax classification must be checked)
- ☐ Completed and signed Registered Independent Sales Representatives Disclosure Document. (must be completed even if no representatives exist)

Independent Sales Contractor (ISC) Application

Required Fields*Tell Us About Your Business**

*DBA Name:		*Legal Name	
*Business Phone:		* Business Fax:	
*Physical Address:		*City:	*State:
*ZIP Code:	*Business Start Date:		* State Incorporated:
*Do you own a website? <input type="checkbox"/> Yes <input type="checkbox"/> No * If Yes, please list all sites:			
*Contact Name:		*Contact Phone:	*Contact E-mail:

Owner Information

*Owner/Partner Officer Name:		*% of Ownership:	Home Phone:	
Title:	Home Address:	City:	State:	Zip:
*Owner/Partner Officer Name:		*% of Ownership:	Home Phone:	
Title:	Home Address:	City:	State:	Zip:

Additional Business DataHow is business sold (check all that apply) : ☐ Telesales ☐ Feet on the Street ☐ Agents ☐ VAR ☐ Banks ☐ Other

Why did you choose TransFirst?

*Are you Site Data Protection (MC) and Cardholder Information Security Program (Visa) compliant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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*Are you currently storing cardholder information?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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IC Marketing Representation***The goal of this section is to determine how IC is represented in the market. Please attach the following marketing material:**

- ☐ Business Card(s) or ☐ Check here if you do not have a Business Card
☐ Marketing Slicks ☐ Flyers ☐ Advertisements ☐ Yellow Page Information ☐ Other Material used for soliciting merchants

*** Authorization / Release**

ISC authorizes TransFirst to obtain from third parties financial and credit information without limitation relating to ISC and principals in connection with our determination whether to enter into the agreement which is the basis for this application. This approval shall be valid following execution and shall continue so long as ISC is receiving compensation from TransFirst and can be used by TransFirst to determine the ongoing financial position of the ISC. TransFirst may also access and use information which ISC has provided for any other reason. TransFirst will not provide this information to any parties other than designated authorized representatives of TransFirst. Upon request, ISC shall provide to TransFirst or their representatives reasonable access to your facilities and records for purposes of performing any inspection and/or copying of your books and/or records deemed appropriate. For these purposes, please provide the Social Security Number for each Owner/Partner Officer listed in this application.

Social Security Number:	Name (Type/Print):
Social Security Number:	Name (Type/Print):

(Type/Print Name)

(Signature)

(Title)

(Date)

(Type/Print Name)

(Signature)

(Title)

(Date)

INTERNAL USE ONLY Received by: _____ Title: _____ Date: _____



Merchant Advisory Services

Independent Sales Contractor (ISC) Application
Additional Required Information

***Place Drivers License Here**

(If a valid driver's license is not available, please include a state or
government issued photo ID)

ACH Authorization Form

Business (Vendor) Name:	
Business (Vendor) Address:	
Business (Vendor) City, State, Zip:	

(Vendor) sells goods and/or services to TransFirst® Merchant Services Inc. and/or one or more of its subsidiaries.

TransFirst® Third Party Sales, LLC is requesting the flexibility to make payments for such goods and/or services by Electronic Funds Transfer (EFT) through the Automated Clearing House (ACH) Network and/or Federal Reserve Wire System. (Vendor) agrees to grant such flexibility.

Therefore, (Vendor) hereby (1) authorizes TransFirst® Merchant Services Inc. to make payments for goods and/or services by EFT and to initiate, if necessary, adjustment or debit entries for any credit entries made in error, (2) certifies that it has selected the following financial institution to receive such payments on its behalf, and (3) directs that all such electronic funds transfers be made as provided below:

Receiving Financial Institution:

Bank Name:	
Address:	
City:	
State:	
Zip:	
Routing #:	
Accounting #:	
Account Type (Choose One):	<input type="checkbox"/> Deposit (Checking) Or <input type="checkbox"/> Savings

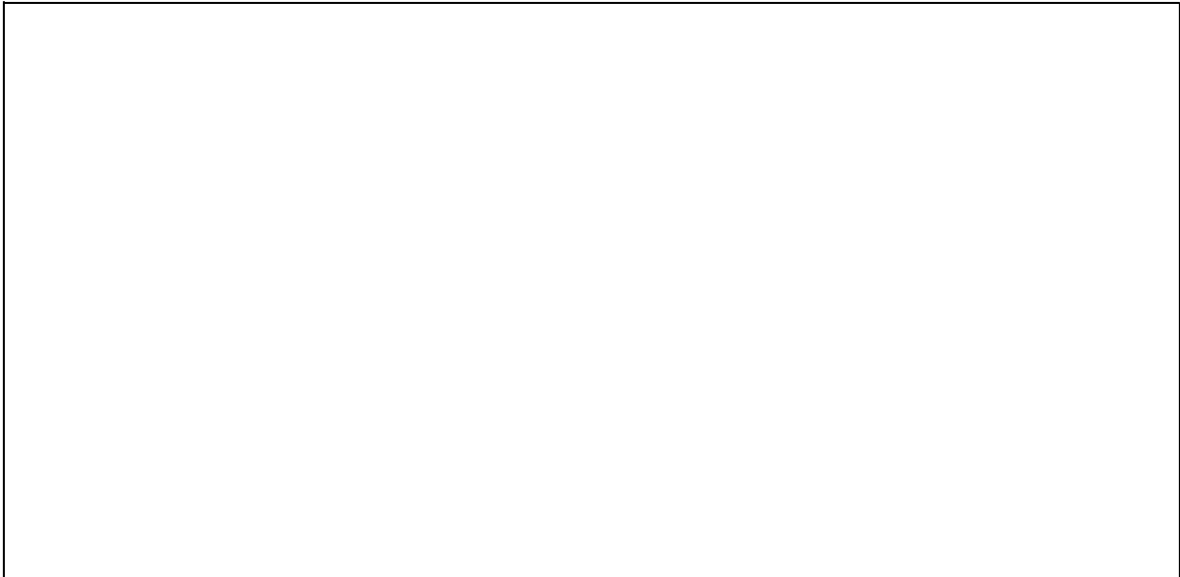
(Vendor) will give thirty (30) days advance, written notice to TransFirst® Merchant Services Inc. of changes in financial institution or other payment instructions. This authorization will remain in full force and effect until TransFirst® Merchant Services Inc. has received written notification from (Vendor).

Name of Company:	
Authorized Printed Name:	
Authorized Signature:	
Title:	
Date:	

IMPORTANT

**VOIDED BUSINESS CHECK or DIRECT DEPOSIT
AUTHORIZATION FORM MUST BE INCLUDED**

Thank you!

A large, empty rectangular box with a thin black border, intended for the user to provide the required information.

**PLEASE DO NOT FORGET TO INCLUDE
THIS INFORMATION**

REGISTERED INDEPENDENT SALES REPRESENTATIVES

ISC DBA Name:

Any sales representative acting on behalf of ISC in the solicitation of Merchant Agreements must be registered with PROCESSOR. ISC represents that the following is a list of ISC's sales agents, independent contractors, sales offices, or referral partner as of the Effective Date and ISC agrees to update this information with PROCESSOR as necessary in order for PROCESSOR to maintain an accurate and current list of registered sales representatives acting on behalf of ISC.

[illegible]

ISC (Type/Print Name)

(Signature)

(Title)

(Effective Date)

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.