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Merchant Service Agreement (See checklist on back page before completing)

Please Send Welcome Kit



CHEXviaPHONE (non-recurring)



Automatic Payment Plan (recurring)



SpeedCHEX.com (virtual electronic check and terminal)



CHEXcollect (1 app/store) (FREE electronic check recovery) NO FEES

Merchant Information

Legal Business Name: Fed Tax ID#:
DBA Name: State Tax ID#:
Physical Address: # of Locations:
City: State: Zip Code: # of Employees:
Mailing Address: Date Established:
City: State: Zip Code: Days/Hours of Operation:
Type of Business (Industry): Telephone # for Customer Service:
Primary Telephone: E-mail Address: Facsimile: Website:
Main Contact: Title:

Number of Years In Business: Yrs. Mos.

Type of Ownership: Sole Proprietor Partnership LLC Corporation Government Non-Profit Other:

Products/Services sold via EFT:

Average Transaction \$: Largest Transaction Amount \$: Estimated # of Transactions: /month
Peak Volume Days: Est. # of Transactions on Peak Days: Total Estimated Monthly Volume \$:

Requested Credit Limit (per item): \$

Schedule of Service and Fees for ACH Transactions

Table with 3 columns: Fee Name, Amount, and Additional Info. Includes Application Fee, Set-Up Fee, SpeedCHEX Virtual Terminal, Virtual Terminal Hyperlink Set-Up, Hardware, Total, Monthly Service Package, SSL Virtual Terminal Per Transaction Fee, Virtual Terminal RMRS Address Verification, Discount Fee, Per Transaction Fee, Per Returned Item Fee, Online CHEXcollect Monitoring Service, CHEXcollect Paper Credit, Cancel Transaction, Reversals, Illegal Items, and Optional NSF Collect Fee.

Standard Hold Time: 4 Days

Comments:

*Optional NSF Fee Collection: This is an optional service that we can perform on your behalf. The rebate amount (which is the difference between the NSF collection fee and the amount charged) will be applied to offset your monthly bill.

Do not collect any NSF fee from our customers. Collect: \$ from our customers or amount allowed by the state law.

Method of Payment for Application Fee, Hardware & Software Electronic Debit: \$ Check Enclosed: \$

Officer Information

Name [#1]: Title: % Equity Ownership:
Residence: City: State: Zip Code:
How Long?: Yrs. Do You Rent or Own?: Home Phone #:
Social Security #: Date of Birth:

Name [#2]: Title: % Equity Ownership:
Residence: City: State: Zip Code:
How Long?: Yrs. Do You Rent or Own?: Home Phone #:
Social Security #: Date of Birth:

Transaction Debit Account Information

Bank Name:
Phone #:
Routing #: Account #:

Merchant Approval

As a duly authorized representative for the merchant named above, I agree to be bound by the Terms and Conditions for Electronic Funds Transfer Services and authorize the account(s) above to be debited and/or credited by Creative Cash Flow Solutions, Inc. according to the attached Terms and Conditions. This authorization is also applicable to any new account information provided to Creative cash Flow Solutions, Inc. at some future time.

Signature: Date:
Printed name: Title: