

Please complete the form below and Fax to: **1-248-623-4444**

Information needed to get your account started

Legal Name of Business:	Street Address:	City/State/ZIP:
Tax ID #:	Business Start Date Month/Yr	How long at this location:
DBA Name:	Street Address:	City/State/ZIP:
<input type="checkbox"/> Private Corp <input type="checkbox"/> Public Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit Corp	Phone:	Fax:
Bank of Deposit:	Routing #:	Account #:
Name of Signer:	Home Street Address:	City/State/ZIP:
Social Security #:	Signer's Date of Birth:	Percent of Ownership:
Signer's Home Phone:	Signer's Title:	<input type="checkbox"/> Signer's previous business accepted credit cards <input type="checkbox"/> Signer had past bankruptcy
Type of Business:	Merchandise Sold or Service Provided:	Approximate Annual Sales:
Trade Reference:	Street Address, City/State/Zip:	Trade Reference Phone:
Annual Visa & MC Volume:	Average Ticket:	% of Visa & MC Swiped: % of Visa & MC Keyed:
Discover: <input type="checkbox"/> YES <input type="checkbox"/> NO	Current American Express #:	Check Service Provider, Station #:

Additional documents requested:

Voided check

(Cannot be a starter check - if this is what you currently have, a letter from your bank representative will be required. Must be drafted on their letterhead, including routing and account numbers and the representatives contact information)

2 - 3 Months of current bank card processing statements

(Underwriters may request additional financial information upon account review)