



SETUP CHECKLIST

Verified By:		DBA:	
Date:		Agent:	

Paperwork Checklist

Signed ABTEK MPA	Invoice (if applicable)	3 Months of Processing Statement
Driver's License—Front and Back	Voided Check OR Bank Letter	Financials- Tax Return/Bank Statements (if need)

Business Data

Retail	Restaurant	Lodging	Emerging Market	E-Commerce	Petro	B2B	QSR	MOTO	Supermarket	Rental
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Location Contact Information

Name:	Phone:	Email:
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POS/Software Information

Product Name:	Version:	POS Stations:
EMV Enabled? No Yes	Type of EMV reader:	Number of EMV Readers:

POS Support Contact Information

Name:	Phone:	Email:	Website:
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Terminal Information

Quantity	Description Terminal/ PIN Pad	Ownership			Prompts				Communication				Debit	EBT			
		Purchase	Placement	Conversion	Invoice	Tips	Server	Tax	Dial Prefix	Wireless	WiFi	IP	Debit	Cash	Food	Both	

Closing Details

Auto Close Time:	AM	PM	Time Zone:
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Gateway Information

VT/Gateway Name:			
Recurring Billing	Customer Database/Stored Cards	Invoicing	Level III
System Administrator User:	Email:		

Miscellaneous

Gift Card:	Dual Pricing:	Flat Fee	Percentage
Check Service:	Surcharge:	Flat Fee	Percentage

Ship and Deploy Details

Shipping Method:	Ground	2 Day Air	Next Day Air	Bill To:	Deployed By:	ABTEK	Agent
Shipping Address:	DBA	Legal	Other				

Additional Notes