

Industrial Payment Services Merchant Application

Industrial Payment Services (IPS) provides credit, ACH, check and stored value payment systems to merchants in a variety of industries. This application allows you to process checks, electronic checks, debit & credit transactions, sales refunds, voids and pre-authorizations only for the business identified below. You may not process transactions on behalf of another entity or person.

Merchant Info	Administrator Info
Merchant Name:	Administrator Name:
Merchant EIN:	Administrator SSN:
Merchant Business Type: □LLC □Other	Administrator Driver's License:
Merchant SAIC Code:	Administrator Driver's License State:
Merchant State:	Administrator Real ID:
Merchant Account:	Administrator TSA/Prev ID:
Account to pay fees:	Administrator Email:
Account to receive fees:	
Merchant Mailing Info:	Administrator Mailing Info:
Address:	Address:
City:	City:
State:	State:
Zip:	Zip:
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Processing Expectation	Hardware and Administrative tools
Number of SKUS:	Point of Sale Hardware Requested: ☐Yes ☐No
Average SKU price:	Web API Access Requested: □Yes □No
Annual revenue:	Do you have an SSL certificate □Yes □No
Average sales ticket:	,
Percentage repeat sales:	Daily Sales Report Requested: □Yes □No
Percentage online sales:	Weekly Sales Report Requested: □Yes □No
Percentage phone sales:	Monthly Sales Report Requested: □Yes □No
Percentage in-person sales:	Report Email Address:
	nepore Email Address.
Do you offer* subscription sales: \square Yes \square No	
Do you offer* stored value services: \square Yes \square No	
*or intend to offer	
Consent and Agreement	
Do you agree to our Terms and Conditions Policy as described in Appendix: VTA: ☐Yes ☐No	
Do you agree to our Commercial Entity Agreement Policy as described in Appendix: CEA: ☐Yes ☐No	
Do you agree to our Anti Money Laundering Policy as described in Appendix: AML: ☐Yes ☐No	
Do you agree to our Know Your Customer Policy as described in Appendix: KYC: ☐Yes ☐No	
Do you agree to our Chargeback Response Policy as described in Appendix: VTA: ☐Yes ☐No	
Do you agree to our Arbitration Policy as described in Appendix: VTA: ☐Yes ☐No	
Authorized Signer:	
Name:	
Title:	
Signature:	
Date:	

