

Request for New Merchant Account – PIN Pad/Wireless PIN Pad

Merchant Legal Name: Will always be “Queen’s University”

University Department Information:

Doing Business As			
Business Address			
Primary Contact Name		Primary Contact Phone Number	
Primary Contact Email		Date	
Business Officer Name		Business Officer Phone Number	
Business Officer Email			

Deadline for Setup (if applicable – please allow 4-6 weeks): _____

Purpose for opening a new merchant account: _____

Type of service required:

<input type="checkbox"/>	PIN Pad	<input type="checkbox"/>	PIN Pad (TAP Enabled)
<input type="checkbox"/>	Cellular PIN Pad	<input type="checkbox"/>	Cellular PIN Pad (TAP Enabled)

Number of PIN pads requested: _____

Physical Location of Hardware/Service (if applicable):

Building		Room #	
Jack # (if applicable)			
Chartfield			
Please note that by signing this form, the department agrees to installation (jack/wiring) costs of up to \$1,000 –chartfield required above. Business Officer to initial this box for approval			

Payment Types to Accept and Estimated Volumes (Annually):

Payment Type	(Y/N)	# of Transactions	\$ Value of Transactions
Visa			
Visa Debit			
MasterCard			
MasterCard Debit			
American Express (Amex)			
Debit/Interac			
Other			
Totals			

Banking Information:

Department Bank Account (if applicable)	
Please either enter bank acct # above or chartfield info below, not both	
Revenue Chartfield – For Deposits	
Expense Chartfield – For Fees	

User Access Required:

Chase Resource Online - needed for reporting access (statements, dispute management, etc)			
Name		Email	Phone #
If you have multiple users to add, please include an excel spreadsheet with the details required when submitting via email to the PCI Coordinator email address (finpcico@queensu.ca). Please note: all users must complete the requisite training and sign an Ethics Document before the merchant account becomes active.			

Please note:

- The PIN Pad will be delivered directly to the business address indicated on this form.**
- Do not use the PIN Pad until it has been confirmed that the jack has been added to the PCI Network.**

MANDATORY ATTESTATIONS – all of the procedures below must be followed. Failure to follow any of the following procedures may result in the merchant account being closed.

Please confirm the following:

No payment card information is to be received by email, campus mail, text or fax (unless specific fax machine & related configuration was approved in advance in writing by the PCI Coordinator)	
If payment card information is to be written down temporarily on any paper, that paper must be shredded as required by PCI policy	
Any/all staff handling payment card information will complete the appropriate annual training and sign an ethics agreement as per their role on the Declaration Document and in accordance with Queen’s Payment Card Acceptance Policy & Procedures	
A PIN Pad inspection log will be filled out and submitted as per the Queen’s Payment Card Acceptance Policy & Procedures	

Signatures:

By signing this document, the department agrees to be PCI Compliant at all times and acknowledges that all of the costs associated with this Merchant Account will be charged to the department specified in this form.

Primary Contact

Business Officer

Full Name (please print): _____

Full Name (please print): _____

Signature: _____

Signature: _____

Date: _____

Date: _____

Please email the completed, signed form to the PCI Coordinator at finpcico@queensu.ca. If you have any questions regarding this form, please contact the PCI Coordinator at finpcico@queensu.ca.

Finance Use Only:			
Completed Request Form		If Missing Info, What Info	
Signed by Business Officer		Forms sent to Acquirer, include date	
Bank Form from BMO, if required		Approval from Acquirer, include date	
Acquirer Agreement Form		iTrack, if necessary, include date	
Entered on PCI Inventory spreadsheet		PCI Coordinator Approval, include date	