

Application for a New School Account (POS/e-Commerce)

Thank you for choosing eCOMM Merchant Solutions.



- In the top menu use "File > Save As" to save this PDF form at a convenient location on your computer.
- In Adobe Reader X, XI go to Edit menu > Preferences > Security (Enhanced) & un-tick 'Protected Mode'.
- Complete the form electronically (not manually).
- You can part-fill the form, save it and return to it later.
- When fully completed, save again and then click on "Send Application".

Version: 2022.03.25

Section 1 - Applicant

School Name

School Address

Postcode

Country

School Office Phone (+ country / area code)

School Website

Roll Number

Principal Details

PRINCIPAL 1

Full Name	Select Role		Date of Birth (DD/MM/YYYY)
	Principal	Vice-Principal	
Address		Phone	Email

PRINCIPAL 2

Full Name	Select role		Date of Birth (DD/MM/YYYY)
	Principal	Vice-Principal	
Address		Phone	Email

Operational Contacts

Secretary Contact Name: Secretary's Contact Email: Secretary's Contact Phone No. (include country & area code)

Bursar's Contact Name: Bursar's Contact Email: Bursar's Contact Phone No. (include country & area code)

Section 2 - Processing Details

Projected Processing

Card Present (Chip & PIN)	%	What is your projected average monthly processing?
e-Commerce	%	What is your minimum transaction price?
Mail Order	%	What is your maximum transaction price?
Telephone Order	%	
TOTAL	100%	

Merchant History

What is the name of your current/previous Acquirer?

Have you ever been terminated by an Acquirer? Yes No

If "Yes" please provide details and the controls now in place to prevent further events of this nature:

Why are you terminating your relationship with your current / previous Acquirer?

Processing History

Note: Figures entered below should be for debit & credit, domestic & international.

	Visa	Mastercard / Maestro
What is your average sales volume per month?		
What is the average fraud to sales ratio per month?	%	%
What is the average number of chargebacks per month?		
What is the average chargeback ratio per month?	%	%

Section 3 - Point of Sale Requirements

POS Terminal Requirements Please enter a quantity beside the type(s) of terminal and number of base stations you require.

Portable Terminal (Charging) Base Station

If you require more than one terminal please outline below the location where each terminal will be located in your business.

We recommend that the refund function is passcode protected.

If you would like to passcode protect refunds, please enter a 4 digit passcode here:

For POS device administration, please assign **two numeric** passwords that will be memorable to you, one 4 digits, one 6 digits:

(i) 4 digit admin passcode:

(ii) 6 digit admin passcode:

Section 4 - eCommerce Requirements

**** N.B. To enable eCOMM Merchant Solutions to email receipts to your customers please see the technical note on page 4.**

School Website(s): Live IP Address(es): School Descriptor(s): UAT / Test IP Address(es):

Please provide login credentials for the member areas of your websites, if applicable:

Test Website	Test Username / login	Test Password
1		
2		

Currencies required: EUR GBP USD AUD NOK

Do you require a virtual terminal? Yes* No *If yes, please outline why:

Section 5 - Bank Account Details

Account Currency EUR GBP
BIC / Swift IBAN (International Bank Account Number)

Sort Code Account Number

Bank Name & Address

Account Holder Name

NOTE: Additional settlement accounts for other currencies can be added upon request.

Section 6 - Required Documents

Please indicate, as appropriate, if the following documentation has been provided.

- | | | |
|--|-----|----|
| • ID and address verification for the school principal. (Address verification must be dated within the last three months.) | Yes | No |
| • Three months processing statements for eCommerce, showing a breakdown (volume & value) of sales, chargebacks & refunds for both Mastercard and Visa. | Yes | No |
| • Evidence of Bank account in the name of the school - e.g. bank statement or a stamped and signed letter from the account holding branch. | Yes | No |

Depending on the nature of your business structure/model/operation we may request additional documentation, at our discretion, to satisfy regulatory and card scheme requirements.

Declarations

Completed forms should be sent to applications@ecomm365.com

I understand my obligation to be certified as compliant with the Payment Card Industry Data Security Standards (PCI DSS).

Please see the PCI-DSS Merchant Guidelines at <https://ecomm365.com/downloads> (This box must be ticked to proceed with your application.)

Have you ever experienced an Account Data Compromise? *Yes No

*If Yes, please specify the details:

I also declare on behalf of the company and on behalf of myself that, to the best of my knowledge, neither the company, nor the website, nor myself have ever been involved in excessive chargebacks, fraud or content violation, nor have any of the above ever been terminated by an acquirer or asked by an acquirer to terminate an agreement within a set period of time and that all of the information I have provided in this application form is true and accurate.

By signing this application form, you are providing consent to us to carry out background checks with Credit Agencies and other Third Parties in order to fulfill our Regulatory and Card Scheme obligations. This information may be recorded and referenced in the future.

School Name:

Principal's signature: _____ Print name: _____ Date: _____

- When you have completed and checked everything, save the form and click the 'SEND APPLICATION' button.
- The form is then validated and your email should open. If it does not, please email PDF to applications@ecomm365.com
- We require that you print this signature page, **sign it by hand** and return it to us.

Please review our Privacy Policy, available online at: <https://ecomm365.com/privacy-policy.aspx>