INTERNATIONAL MERCHANT APPLICATION

| COMPANY PROFILE | | | | | | | | | | | |
|---|------------------|--|---|--|---|-------------------------------------|-------------------|--|--|--|--|
| Merchant Name (DBA or Trade Name | | Registered Company Name | | | | | | | | | |
| Location Address: | | Registered Company Address: | | | | | | | | | |
| City, State/Region/Province | Zip/Postal C | ode C | ountry | City, State/Region/Province | Zip | p/Postal Code Country | | | | | |
| Contact Name, Position | Email Addr | mail Address Technical Contact Name Technical Contact | | | | ntact Email Address | | | | | |
| Telephone Number | Fax Numbe | r | | Billing Contact Name | Billing Contact Email Address | | | | | | |
| Country of Registration (incorporation) | | Compan | y Registration Nu | Imber / Federal Tax ID | V | AT Identification # (if applicable) | | | | | |
| Type of Business: O Corporation | O Limited | Liability C | ompany O Sc | le Proprietor O Partnership | Not for Profit | | | | | | |
| Is your company registered in EU? OYES ONO Have you ever filed for Bankruptcy? OYES ONO If yes, when? | | | | | | | | | | | |
| EU Registered Company Name (if | | EU Registered Directors (if applicable) | | | | | | | | | |
| EU Registered Office Address (if applicable) | | | | City, Region/Province Pos | | stal Code (| Country | | | | |
| Length of Time in Business: | Capital Res | ources (a | essets): | Turnover Last Year (income): Number of Employees | | | mployees | | | | |
| OWNERSHIP PROFILE (owner | ship must equal | 50% or more |)) | | | | | | | | |
| Name - Principal #1: | | Title | % Owned | Telephone Number | | Email Address | | | | | |
| Date of Birth | | ID # / Social Security | | Identification Type | | Country of Issue | | | | | |
| Address: | | City, State/Region/Province | | Zip/Postal Code | | Country | | | | | |
| Name - Principal #2: | | Title | % Owned | Telephone Number | | Email Address | | | | | |
| Date of Birth | | ID # / Social Security | | Identification Type | | Country of Issue | | | | | |
| Address: | | City, State/Region/Province | | Zip/Postal Code | | Country | | | | | |
| BUSINESS BROSH E | | | | | | | | | | | |
| BUSINESS PROFILE | nany | | | | | | | | | | |
| Please provide a profile of the con | ірапу | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Current Acquirer (if applicable) | (if applicable) | Reason for leaving current acquirer (if applicable): | | | | | | | | | |
| , , , , , | | Cateway | (п аррпсаые) | Reason for leaving current a | aving current acquirer (ii applicable): | | | | | | |
| Length of time accepting credit card | | Customer regions (must equal 100%): % U.S. % Europe % Asia % Rest of the World | | | | | | | | | |
| Method of Acceptance (must equal 100%): % MOTO % Internet % Swipe | | | | Estimated Monthly Volume | | Average Tick | et Highest Ticket | | | | |
| URL(s) - separate each by a comma | | | | | | | | | | | |
| Description of products/ services so | ld (include leng | th of service | Recurring Services? O YES O NO If yes, describe | | | | | | | | |
| | | | | | | | | | | | |
| Is a Call Centre used? YES | е | Is a Fulfillment House used? YES NO If yes, describe | | | | | | | | | |
| Card types to accept: Visa MasterCard American Express JCB Other | | | | | | | | | | | |
| | | ~ Ц | ,circuit Expics | | | | | | | | |

| AUDRENOV REQUESTED | | | | | | | | | | | |
|---|---|--|---|---|--|--|--|--|--|--|--|
| CURRENCY REQUESTED | | | | | | | | | | | |
| In which currency are your products sold? | | | | | | | | | | | |
| In which currency would you like | ce payment to be | e transferred to your ba | nk account? | | | | | | | | |
| BANK INFORMATION | | | | | | | | | | | |
| SWIFT/BIC (Bank Identifier Code) | | Bank Name | Bank Addres | Bank Address | | Bank Phone Number | | | | | |
| Account Number: | | ABA routing code (US) | Account Hold | der: | IBAN Number (EU): | | | | | | |
| PROCESSING HISTORY | LAST MONTH | 2 MONTHS AGO | 3 MONTHS AGO | 4 MONTHS AGO | 5 MONTHS AGO | 6 MONTHS AGO | | | | | |
| Sales volume (USD) | | | | | | | | | | | |
| Number of transactions | | | | | | | | | | | |
| Chargeback volume (USD) | | | | | | | | | | | |
| Number of chargeback's | | | | | | | | | | | |
| Refunds volume (USD) | | | | | | | | | | | |
| Number of refunds | | | | | | | | | | | |
| CARDHOLDER DATA ST | ORAGE COM | MPLIANCE | | | | | | | | | |
| 1. Are you using software or gate | eway application | ? O YES O NO | | | | | | | | | |
| 2. a) What third party software c | ompany/vendor | did you purchase your A | Application from ? | (if applicable) | | | | | | | |
| b) What is the name of the thir | d party software | ? | Ver | sion #? | | | | | | | |
| c) Do your transactions process through any other third parties, web hosting companies or gateways? YES NO If yes, who is it? | | | | | | | | | | | |
| 3. a) Do you or your vendor receive, pass, transmit or store the full cardholder number, electronically? \(\) YES \(\) NO | | | | | | | | | | | |
| b) If yes, where is card data stored? Merchant Third Party Only Both Merchant and Third Party | | | | | | | | | | | |
| b1.) Are you or your vendor Pe | | | | | | | | | | | |
| b2.) What is the name of your Qualified Security Assessor ? (if applicable) | | | | | | | | | | | |
| b3.) Date of compliance: | account data a | Date of last scan: | ONO House who | | | | | | | | |
| 4. Have you ever experienced an ****** Card Association requirements | | | NO If yes, wh | | d that no merchant or | r a morchant's third | | | | | |
| party vendor store cardholder data. I may result in fines or loss of card ac | f you or your vend | or store data, you or your | endor are required t | o be PCI DSS complian | t. Failure to adhere to | these requirements | | | | | |
| SITE INSPECTION | | | | | | | | | | | |
| Merchant: Owns O Rents | Landlord: | Building ⁻ | Type: O Shopping | Ctr Office Bldg | O Industrial Bld | g O Residence | | | | | |
| Area Zoned: O Commercial | O Industrial | O Residencial | | | | | | | | | |
| Square Footage (m²): 0-500 | (46) C |) 501-2 500 (230) | 0 2 501-5 000 (46 | 65) 001 - 10 | 0 000+ (900+) | | | | | | |
| Does Merchant have the approp | riate facilities, ed | quipment, inventory, pers | onnel and license/ | permit to operate the | eir business? O YE | S ONO | | | | | |
| Declarations: I hereby confirm to be the owner of the listed website a different trade name or business affiliation than ind transaction that violates any law, ordinance, or regular parties; 6) Any other amounts for which a customer h goods or services by me / us. I also declare on behal content violation nor have any of the above ever term | icated on this Agreement o tion applicable to my busin as not specifically authorize If of the company and on be | r otherwise approved by the acquirer in vess; 4) Goods which I / we know will be red payment through the acquirer; 7) Caslshalf of myself that, to the best of our known and the contract of t | writing; 2) Fines or Penalties of resold by a customer whom I / v n, traveler's checks, Cash equivalenge, neither the company r | any kind, losses, damages or any we reasonably should know is not of valents, or other negotiable instrumtor the website nor myself (or any of | other costs that are beyond the ordinarily in the business of sellin ents; or 8) Amounts which do no | Total Sale Price; 3) Any ng such goods; 5) Sales by third of represent a bona fide sale of | | | | | |
| Investigate Consumer Report An investigative or consumer report may be made in from any of the undersigned personal guarantor(s), o scope of the investigation requested. | connection with application | Merchant authorizes any party to the | agreement or any of their agen | ts to investigate the reference prov | | | | | | | |
| By printing your name below, y | ou here by agre | ee and accept. | | | | | | | | | |
| Principal # 1 | | Date | Principal # | 2 | | Date | | | | | |
| Required Documents: 6 Months Merchant Process Copy of Principals Passport/ Certificate of Incorporation (Articles/ Memorandum of As | National ID Originating Co. & E | • | • Voi • Mo • MC | Copy of Business/Operating License (if applicable) Voided Check (if available) Most recent Business Bank Statement MOTO/E-Commerce Merchant Info Form (if applicable) Cross Corporate Guaranty (Originating Co. to EU registered Co – if avail) | | | | | | | |