

UNIVERSITY OF LOUISVILLE
APPLICATION FOR A NEW MERCHANT ACCOUNT

Date:

Requestor Name:

Requestor Title:

Department Name:

Physical Street Address:

Building Name, Floor/Suite #:

City, State, and Zip:

Federal Tax ID#:

Customer Service/Dept. Email:

Customer Svc/Dept. Phone #:

Dept. Fax #:

Primary Responsibility:

Name:

Title:

Email:

Phone #:

Secondary Responsibility:

Name:

Title:

Email:

Phone #:

UBM:

Name:

Title:

Email:

Phone #:

Tier 1 or Developer:

Name:

Title:

Email:

Phone #:

Dean/Director or Chair:

Name:

Title:

Email:

Phone #:

Merchant ID/Account Name (MID) requested:
(this name will appear on the cardholder statement)

Visa, MasterCard and Discover are standard with any merchant account.

- Monthly fees will be deducted the following month by PNC/Fiserv, by our contracted processor. Budget 2% to 3% on average; but, is dependent upon number of transactions, average ticket and processing method. For reference, the lower the average ticket the higher the processing fees.
- Annual fees, the University allocates Payment Card Industry (PCI) costs annually based on total sales ~ January/February. Budget approximately \$2.50 per \$1000 sales.

Would you like to accept American Express? Payment and monthly billing (2.25%) will be handled directly from American Express.

Yes

Not at this time. Can be added later.

Describe the goods, services, and/or gifts for which you will receive payments. If any portion is deemed gifts, contact Advancements Department. Please be specific:

Is this an existing or new source of revenue?

Explain why your department wants to accept credit card payments.

Describe the frequency of credit card payments, such as seasonal or year-round activity. If for a conference/event, indicate the date? Provide detailed timeframes of when card payments would be accepted.

Will credit card be the sole method of payment? If not, what other methods of payment do you anticipate accepting for this specific purpose?

How do you plan to process these payments? (check all that apply)

Face-to-Face (Card Present)

**Mail/Telephone/Fax Order (Card Not Present) (MO/TO/FO).

**Website (Online)

**Card data CANNOT be emailed or entered on desktops/laptops/tablets/smartphones, etc.

For Face-to-Face or MO/TO/FO:

- Purchase a stand-alone terminal, Clover Mini \$420:
- IP/Ethernet connection.
 - \$4.95 Monthly Software Fee.
- Purchase a cellular wireless terminal, Clover Flex \$698:
- Cellular or WiFi.
 - If cellular communication, monthly fee is \$15.00.
 - No cost for WiFi. WiFi is allowed as the Clover Flex is Point-to-Point Encrypted (P2PE). ULsecure or an Enterprise Wi-Fi Protected Access II (WPA2).
 - \$4.95 Monthly Software Fee.

For Website:

If you are planning to accept credit card payments via the Internet, please provide the following information:

Beginning Website:

Server name where the website and/or full application is hosted if not the university:

Third-Party Vendor if not using the Plone credit card form:

Third-Party Online Payment Gateway
if not using our processors gateway, Payeezy:
(i.e., Authorize.net):

Note: a separate form for authorize.net will be shared once the processor account is ready to go..

*All website merchants must adhere to [Internet Requirements and Privacy Policy](#).

*All website merchants must develop and submit a credit card diagram and card flow process diagram, preferably before going live.

Please estimate the **ANNUAL** dollar volume, number of transactions, and average ticket:

| | | | |
|----------------|---------------------------------|-------------------|----------------------|
| Face-to-Face | <input type="text" value="\$"/> | # of Transactions | <input type="text"/> |
| MO/TO/FO | <input type="text" value="\$"/> | # of Transactions | <input type="text"/> |
| Website/Online | <input type="text" value="\$"/> | # of Transactions | <input type="text"/> |
| Average Ticket | <input type="text" value="\$"/> | | |

Financial System

University Accounting will post funds received (full amount daily) and fees charged (monthly & annual) to the University's financial system. You will need to identify one Speedtype and one Account code for posting funds received and fees charged from our credit card processor.

Funds Received: Speedtype: Account Code: **

Fees Charged: Speedtype: Account Code: *

** Account code 552605 is setup specifically for Credit Card Fees. It is your option to use this account or change it to the EXPENSE account you wish to use.*

*** Account Code for Revenue typically begins with a '4'. Other options are using a clearing account (130165), however, the department will need to be responsible for the reconciliation/reallocation of the account and need to obtain approval from University Accounting.*

Note: Another option is to send a grid to University Accounting to allocate to multiple speed types on a daily basis. Same process as your department would do for cash and checks.

Monthly Statements:

PNC statements are emailed to the Primary person unless noted otherwise in 'Other Information/' section below.

American Express statements are mailed.

Third-party Vendors:

If any third-party software or hardware vendors will be involved in the processing of credit card payments, including redirection of website for online payments, please identify and describe their roles and responsibilities.

Has Purchasing reviewed the applicable third-party agreements which includes the credit card compliance language (PCI-DSS: Payment Card Industry Data Security Standard)?

Other Information:

By signing this form, he/she acknowledges and understands his/her role as outlined in the University's policies and procedures for [Credit Card Merchants](#) and accepts the responsibility of that role. Additionally, recognizes that the liability for a breach is accepted by the Merchant should a breach occur due to negligence of the department to adhere to the University's policies and procedures for [Credit Card Merchants](#).

By signing this form, the VP/Dean or Director/Chair acting as the Merchant Executive Officer, approves of the business case presented by the department to become a Merchant, the information provided, and the designated Merchant Department Responsible person.

| | |
|--|---------------------------------------|
| _____ Primary Contact (Printed Name) | _____ Primary Contact Title |
| _____ Primary Contact (Signature) | _____ Date |
| _____ Secondary Contact (Printed Name) | _____ Secondary Contact Title |
| _____ Secondary Contact (Signature) | _____ Date |
| _____ UBM (Printed Name) | _____ UBM Title |
| _____ UBM (Signature) | _____ Date |
| _____ Tier 1/Web Developer (Printed Name) | _____ Title |
| _____ Tier 1 (Signature) | _____ Date |
| _____ Dean/Director or Chair (Printed Name) | _____ Dean/Director or Chair Title |
| _____ Dean/Director or Chair (Signature) | _____ Date |

RETURN COMPLETED and SIGNED APPLICATION:

Jill Riede, Merchant Services Manager
 Email: jmried02@louisville.edu

502-852-0892
 Houchens Bldg., LL05

For Merchant Services Use Only

| | |
|----------------------------|--|
| Date Application Received: | |
| Merchant ID #: | |
| AMEX #: | |

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