

E-Business Resource Group

New Merchant Account Questionnaire

Section 1: General Information

The following items must be completed before a merchant account is requested from the University's bank.

Date Requested

Department Name

Address

Address Line 2

City

State

Zip

Contact Name

Phone Number

E-mail

RC Head *

Phone Number

E-mail

* Please note that this proposal must be approved by the RC Head

1. Describe the activity and how it will be accomplished. Include third party payment solutions, software and/or equipment that will be used to process payments for approval by EBRG.

2. Describe the financial evaluation, including detailed costing data and funding options (e.g. sponsors or advertisers).

3. Describe the benefits of the proposed activity including financial and operational.

4a. Explain how the proposed activity supports institutional goals.

4b. Explain how the proposed activity supports unit goals.

5. Explain how the unit intends to advertise or communicate the new service.

6. How will payments be received?

7. Vendor Contract Information

8. Description and Specifications of Technology

9. Look and feel of tool on the web (i.e. what will it look like).

Note: If a website is to be built or an existing one modified to permit acceptance of payment cards, it must be located on the University's Enterprise Web Infrastructure (EWI) servers.

10. Third Party Vendor Information (Company name, service provider)

11. Does the payment application use a separate gateway?

Yes

No

If yes, provide payment gateway information. (Example: Authorize.net + version)

12. Describe target customer base and distribution channels to be used.

13. Describe performance standards.

14. Describe implementation time-line and indicate any business critical dates.

Section 2: Merchant Information

1. "Doing Business As" merchant name; limit 24 characters.

Note: The DBA merchant name will appear on the cardholder's monthly statements. It must be a name recognizable to the cardholder.

2. Statement Information

Note: Must be a US Mailing address. Cannot be a campus address.

Address

Address Line 2

City

State

Zip

Customer Service Phone Number

URL or Web Address, if applicable

3. Indicate which cards will be accepted

Visa

MasterCard

American Express

Discover Card

4. Estimated annual sales volume (\$)

Visa/MC

Discover Card

American Express

5. Estimated average ticket size (\$)

Visa/MC

Discover Card

American Express

6. Describe product/service being sold (e.g. conference registration, merchandise sales, etc)

7. Is the business open year round or seasonally? Explain.

8. When is the processing End Date? (e.g. one time event, ongoing, etc)

9. Department Account Number (for associated fees)

If you are requesting rental terminals from PNC Merchant Services, please provide the following:

10. Building name and address for each terminal location for internet access

11. Technical Contact Information for your department

Contact Name(s)

Phone Number

E-mail

Section 3: Office of Finance Use Only

Visa/MC

Discover

AMEX