

Please complete all sections of the form. Shift4's forms are easiest to use with Adobe Reader 8.0 or higher. Click here <http://www.adobe.com> to obtain a FREE upgrade at the Adobe website.

Merchant Information

Business Name (35)

Address 1 (35)

Address 2 (35)

City (22) State (2) Zip/Postal Code (5-7)

Telephone (10)

Merchant Type Information

MCC/SIC (4) Merchant Type* Country Code (3)* Currency Code (3)*

Merchant Time Information

Time Zone* If UTC: Offset in Minutes, enter the offset: (3) (+) (3) (-) (3)

Is Daylight Savings Time (DST) observed?* End of Business Day*

Voice Center Information

	Voice Center Phone (10)	Voice Approval Merchant Number (30)	
American Express	<input type="text"/>	<input type="text"/>	
Diners/Carte Blanche	<input type="text"/>	<input type="text"/>	
JCB	<input type="text"/>	<input type="text"/>	
MasterCard	<input type="text"/>	<input type="text"/>	MasterCard Premier Merchant <input type="checkbox"/>
Novus/Discover	<input type="text"/>	<input type="text"/>	
VISA	<input type="text"/>	<input type="text"/>	

Bank/Processor Specific Information

Bank ID / Acquirer Bin (6) <input type="text"/>	Merchant ID (11) <input type="text"/>
AX SE Number (10) <input type="text"/>	Terminal S/N (2) <input type="text"/>
DC SE Number (10) <input type="text"/>	CB SE Number (10) <input type="text"/>
NS SE Number (10) <input type="text"/>	JC SE Number (10) <input type="text"/>
CK Qual Code <input type="text"/>	CC Qual Code (5) <input type="text"/>

*These fields are non-variable, please select from pull-down options.