

Merchant Account Application

ISO ACCT# _____

<u>Company Information Section</u>			
Company Name:			
Type of Company (Circle One) : C-Corp S-Corp LLC Close Corp Sole Proprietor Partnership Non-Profit OTHER			
WHEN DID YOU START THIS BUSINESS? ____/____/____		What Year Did You Incorporate?	
Complete Address:			
Work Telephone:	Cell Phone:	Fax:	
Email:		Website:	
Tax ID:	or	International Tax #:	
What Is Your Expected Monthly Processing Volume: \$		Avg. Check Amounts: Low: \$ High: \$	
Describe Your Business Here and HOW YOU ADVERTISE – Be Detailed & Use Extra Paper If Necessary:			

Personal Information Section

First & Last Name:	SSN:	Position in Company:
Complete Address:		

Banking Information Section

Deposit To (Routing Number): ____-____-____	Deposit To (Account #):
Name on Your Bank Account (if incorrect bank WILL REJECT DEPOSITS):	
Complete Address on Your Bank Account:	

Choose Your Login Information

User Name For Login (at least 4 characters):	4-digit SECURITY PIN CODE: ____-____-____-____
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Requirements For Account Activation

- A clear Color Copy of your Drivers License or Passport. Must be from the owner or Principle / Officer in company.
- A completed copy of the Credit Card Authorization Form and Checking Account Authorization Form.
- Completed Arbitration Agreement, Refund Policy, Signature Card, and Compliance Statement.

By using **Green** By Phone, Inc. to process payments and bill payments for and on behalf of your company you agree to the Terms of Service / Agreement, located online at www.green.money/terms-and-conditions, and with your signature show that you have located, read or reviewed, and agree with this agreement. If you cannot locate or read the agreement DO NOT sign here.:

Position in Company _____

Date ____/____/____
Month Day Year

Signature _____