

Application Checklist

Complete all application data fields as suggested by Sample Application.
Call for assistance: 1-800-253-9679.

Be sure to select CASH preferences:

- Indicate withdrawal increments (i.e. \$20 / \$40 / \$60...) see “Quick Cash Keys.”
- Set maximum withdrawal amount...see “Maximum Withdrawal.”
- Set “Total Surcharge” amount and indicate revenue share among all parties involved (“Merchant” / “UMS” / “Salesman” / etc.).
The sum of these amounts should = total surcharge amount.

Provide current banking information for account that is to receive surcharge revenue (include copy of Voided Check).

Provide accurate billing and shipping information on Invoice.

Select desired form of payment:

- Credit card authorization...see credit card authorization form.
- Checking account debit...see ACH Debit Form.
- Leasing options available...documents provided separately (please call).

FAX all documentation to 1-800-398-1709.

No deposit slips!

ATTACH VOIDED CHECK HERE

**Starter check? Check not imprinted w/ business name?
See sample bank account verification letter (required).**

SAMPLE BANK ACCOUNT VERIFICATION LETTER

A **bank account verification letter** is required if your checks are starter checks, i.e. if they don't have the business name IMPRINTED on them. The letter must be signed on bank letterhead by a bank officer, and it must mention: (1) DBA name on account, (2) bank routing number, and (3) account number. Use this sample letter to make your request at the bank, either in person or by phone.

May 5, 2005

To Whom It May Concern:

This letter is to inform you that John Doe, owner of Extra Wireless, Inc. (DBA: Extra Wireless), has a business account with Bank of America. The routing number associated with the account is 012309999, the account number is 009991234567. The branch address for this account is:

1005 Westlake Blvd.
Tampa, FL 33609
813-555-1234

If you have any further questions, please do not hesitate to call me at 813-555-1357.

Regards,

Sarah Smith
Branch Manager

WORK ORDER

Type of Stand:

Options:

- Light
 External Pin Pad

Type of Terminal:

Set Up Fee:

Name of Account	<input style="width: 95%; height: 30px;" type="text"/>	Store ID	<input style="width: 95%; height: 30px;" type="text"/>
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Location Address	<input style="width: 98%; height: 30px;" type="text"/>
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City	<input style="width: 95%; height: 30px;" type="text"/>	State	<input style="width: 95%; height: 30px;" type="text"/>	Zip	<input style="width: 95%; height: 30px;" type="text"/>	Phone Number	<input style="width: 95%; height: 30px;" type="text"/>
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Description of Goods/Services	<input style="width: 98%; height: 30px;" type="text"/>	Location Contact Name	<input style="width: 98%; height: 30px;" type="text"/>
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Federal Tax ID#	<input style="width: 95%; height: 30px;" type="text"/>	Fax #	<input style="width: 95%; height: 30px;" type="text"/>	Yrs. in Business	<input style="width: 95%; height: 30px;" type="text"/>	# of Locations	<input style="width: 95%; height: 30px;" type="text"/>	Type of Ownership:
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Corporate Name	<input style="width: 98%; height: 30px;" type="text"/>	Owner	<input style="width: 98%; height: 30px;" type="text"/>
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Corporate Address	<input style="width: 98%; height: 30px;" type="text"/>
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City	<input style="width: 95%; height: 30px;" type="text"/>	State	<input style="width: 95%; height: 30px;" type="text"/>	Zip	<input style="width: 95%; height: 30px;" type="text"/>	Corporate Phone #	<input style="width: 95%; height: 30px;" type="text"/>
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Corporate Fax Number	<input style="width: 98%; height: 30px;" type="text"/>	Owner Cell Number	<input style="width: 98%; height: 30px;" type="text"/>	Owner Home Number	<input style="width: 98%; height: 30px;" type="text"/>
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Quick Cash Keys: Key 1 Key 2 Key 3 Key 4 Key 5 Key 6 Key 7 Key 8 Maximum Withdrawal:

Default Amounts:

Surcharge Information and Authorization

Merchant \$ UMS \$ Salesman \$ Owner \$ Other \$ Total Surcharge \$

Merchant Bank Name Bank Phone #

Routing# Account #

ACH AUTHORIZATION RELEASE

Date _____

_____ hereby authorizes World Access Corp. to initiate ACH transfer entries for all of the following:

- Credits
- Debits
- Transaction Settlement
- Adjustments
- Surcharge

These entries will be made through the account at:

Financial Institution Name: _____

Address: _____
Street City State Zip

Phone Number: _____

Account Title/Name: _____

Routing Number: _____ **Account Number:** _____

Type of Account: (check one) **Checking** **Savings** **Money Market** **Credit Union**

Company Name: _____ **Attention:** _____

Address: _____
Street City State Zip

Phone Number: _____ **Email:** _____


Signature: _____ **Date:** _____

PLEASE ATTACH A PRE-PRINTED VOIDED CHECK. BANK DRAFTS AND DEPOSIT SLIPS ARE NOT VALID. STARTER CHECKS CAN NOT BE ACCEPTED. IF NO PRE-PRINTED CHECK IS AVAILABLE ATTACH A BANK LETTER IN PLACE OF A PRE-PRINTED CHECK.

CREDIT CARD AUTHORIZATION FORM

CARDHOLDER INFORMATION		
Company Name:	Name on Card:	
Card Holder Billing Address:		
City:	State:	Zip:
Email Address:		

PURCHASE INFORMATION	
ITEM(S) TO BE PURCHASED	COST
TOTAL CHARGE AMOUNT:*	

PAYMENT AUTHORIZATION	
CARD TYPE:	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover
CARD NUMBER: _____	EXP. DATE: _____
CARD IDENTIFICATION NUMBER: _____ <small>Please reference the picture to the right for the Location of this number on your credit card.</small>	
	<small> Visa & MasterCard American Express 3 digits on back. 4 digits on front. </small>

* I authorize the credit card listed above to be charged the total charge amount displayed.
 I acknowledge that the billing entity is Universal Merchant Services.

PRINT NAME

SIGNATURE

DATE