



**MERCHANT ACCOUNT REQUEST FORM**

**Type of Request:**

Accept credit cards  Update contact or G/L information  Foreign Currency Accepted   
Add new credit cards  Close credit card account  Accepted Currency: \_\_\_\_\_

**Applicant Information**

School or Center Name: \_\_\_\_\_  
Organization Name: \_\_\_\_\_

**Address (for statements& terminal supplies):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account Manager Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
(for web accounts only)  
IT Contact Name: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**CREDIT CARD MERCHANT INFORMATION**

**Credit Cards which will be accepted:**

(account numbers will be filled in by Treasurer's office)

Visa/Mastercard  \_\_\_\_\_  
American Express  \_\_\_\_\_  
Discover  \_\_\_\_\_

**Type of Processing:**

Terminal w/ phone line - Face to Face swipe- card present   
Terminal w/ phone line - Mail/Phone order-card not present   
Web-Cyber Source   
Web - Third Party (must be pre-approved by Treasurer)

Name of the Third Party Provider: \_\_\_\_\_  
Describe third party service:  
What is it used for? \_\_\_\_\_  
Where is it hosted? \_\_\_\_\_  
How is card data transmitted? \_\_\_\_\_

Does card data get entered through this third party or is control passed to the gateway  
(verisign/cybersource) prior to card data entry \_\_\_\_\_

**Web (E-Commerce ) Applicants Only:**

Provide functional url where customer inputs credit card information:  
\_\_\_\_\_

*\*IMPORTANT: Account numbers can not be assigned without a functional url.*

**Accounting Information:**

BEN Financials Account for Revenue (rev): \_\_\_\_\_  
BEN Financials Account for Expenses(exp): \_\_\_\_\_  
(use object code 5324)

**Account Detail:**

Purpose of account: (registration, sales, fees): \_\_\_\_\_

Anticipated average transaction amount: \_\_\_\_\_  
Yearly \$ Volume: \_\_\_\_\_

**PCI Payment Card Industry (PCI) Data Security Standard (DSS)**

The PCI Questionnaire and the Confidentiality/Non-Disclosure Statement, can be found on the website (<http://www.finance.upenn.edu/treasurer/forms/#CashMan>) must be completed and returned along with this request to insure compliance with PCI standards.

[https://www.pcisecuritystandards.org/tech/supporting\\_documents.htm](https://www.pcisecuritystandards.org/tech/supporting_documents.htm)

**By signing below**, I attest that all sections of the PCI DSS questionnaire(s) included in this submission are complete and all questions answered affirmatively, resulting in overall compliance with the PCI DSS for my School/Center. Further, I attest that all faculty, staff, and students in my School/Center with access to credit card information have completed and signed the Confidentiality/Non-Disclosure form and these are kept on file locally in my School/Center. (Both items found on the website <http://www.finance.upenn.edu/treasurer/forms/#CashMan>). In addition, I understand that a monthly credit card reconciliation must be completed and that failure to follow policies and procedures concerning access to personal, proprietary and the management of merchant accounts otherwise confidential data may result in sanctions and disciplinary action up to and including termination of employment at the University of Pennsylvania.

Applicant/Account Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Penn ID #: \_\_\_\_\_ Signature \_\_\_\_\_

School/Center Senior Business Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Penn ID #: \_\_\_\_\_ Signature \_\_\_\_\_

**Two copies of this form are required before processing can begin.**

Send signed hard copy of form to: Cash & Liability Management  
3451 Walnut Street FB 737  
Philadelphia, PA 19104 / 6205  
Attn: Dawn MacAdams-Mull

Send electronic copy to: [dawnmac@upenn.edu](mailto:dawnmac@upenn.edu)

<b>Official Use Only</b>
DDA # _____
Tax ID# _____

**PLEASE NOTE: Completed request form takes approximately 4 weeks to process.**

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