   
**PAYMENT Card Acceptance / MERCHANT ID APPLICATION***complete and return to the Payment Card Committee*

# merchant INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Requested Merchant Name (24-character limit) |  | Customer Service Number   (for all inquiries) |  |
| Business Address |  | On Site Contact Name |  |
| City, State ZIP Code |  | Phone |  |
|  |  | E-mail |  |
| PCI CONTact Information | | | |
| Responsible Division |  | Responsible Department |  |
| Responsible Person |  | Phone |  |
| Campus Location |  | E-mail |  |
|  |  |  |  |

**BUSINESS Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Currently Accept Payments/Deposits? | Yes  No |  |  |
| Note: Areas that do not currently handle cash, checks or card payments must contact Management Advisory and Compliance Services (MACS) to establish adequate controls to safeguard University funds. MACS approval is required prior to payment acceptance. | | | |
| Description of Service |  | | |
| Annual Transaction Volume (est) |  | Annual Sales Volume (est) | $ |

# Processing Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Desired Card Brands | | VISA  MasterCard  Discover  Other (specify) | | | | |
| Card Acceptance Method(s) (check all that apply) | | In person  Internet  Telephone  Mail  Other (specify) | | | | |
| Note: Processing of credit cards using any computing resource (computer devices, mobile devices, networks, 3rd party systems) must first be reviewed by Financial Systems & Technology and/or the Information Security Office. Contact the OTS Information Security Office for additional information. | | | | | | |
| Desired Processing Method(s) (check all that apply) | | Terminal  e-Commerce (TouchNet) | | | | |
| Note: Other processing methods must be reviewed and approved prior to accepting payments. This includes but is not limited to use of IP-connected terminals, use of point-of-sale payment software applications, use of third-party vendor virtual computer terminals, and e-Commerce payments transmitted, processed, or stored on the university’s network. | | | | | | |
| 3rd Party System Information | Vendor/System Name  Credit Card Processing Information | | | | | |
| Card Present Device | iCT220  MX915  Other (specify) | | | | Quantity Needed |  |
| Accounting Information | | | | | | |
| Revenue | | | Expenses | | | |
| Source/Cost Center/Account |  | | Source/Cost Center/Account |  | | |
| Note: Merchant department is responsible for all direct costs associated with a merchant account, including but not limited to set-up fees, telephone or networking lines, processing equipment, bank and transactions fees and other charges. | | | | | | |

# agreement

I have read Towson University Payment Card Compliance Policy and PCI Requirements and agree to the responsibilities, policies, and procedures established by the University. I understand it is my responsibility to supervise the activity of payment card processing and ensure staff is trained, and report immediately to the Information Security Office if I know or suspect or it has been alleged cardholder data has been lost, disclosed, stolen, compromised, or misused. I also agree to be responsible for the annual audit.

# SIGNATURES

|  |  |  |  |
| --- | --- | --- | --- |
| Responsible Person Signature |  | Department Head Signature |  |
| Name and Title |  | Name and Title |  |
| Date |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Approvals | | | |
| Student and University Billing Office |  | | Date |
| OTS Information Security |  | | Date |
| Comptroller’s Office |  | | Date |
| Payment Card Committee |  | | Date |
| Financial Systems & Technology |  | | Date |
|  | |  | |
| Office Use Only | | | |