

CARD ACCEPTANCE FORM
FOR INTERNAL USE ONLY

Merchant Identification # ("MID"): _____ (11 digits) MSO User Name _____ Date: (mm/dd/yy) _____
 Check One: New Merchant Multiple Locations: Location _____ of _____ Additional Outlet: Head Office MID: _____
 Business #: _____ Sales Rep ID: _____ Sales Rep Name: **Paul Murton** Sales Rep Phone: **(416) 693-8530**

A. MERCHANT DETAILS

Legal Name		Store #	
Physical Address (No P.O.Box) (Used for legal notices per Section 26 of your terms and conditions)		City	Province/Territory
		Postal Code	
Contact Name		Business Phone	Business Fax
Type of Business <input checked="" type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Non-Profit <input type="checkbox"/> Public Corporation <input type="checkbox"/> Private Corporation <input type="checkbox"/> Government		# of Employees	Mo/Yr Started
DBA/Outlet Name		Merchant Category Code	
Primary Mailing Address (if different from above)		City	Province/Territory
		Postal Code	
Contact Name (if different from above)		Retrieval Requests/Chargeback Information: <input type="checkbox"/> 24 Hr Dedicated Fax or <input type="checkbox"/> Mail	Dedicated Fax #:
Statement Delivery: <input type="checkbox"/> Online <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Print / Mail	Website	Email	
RECON Report: Email: _____ or Fax: _____			
Principal Information: Principals must jointly or otherwise represent at least 51% ownership in the business. If there are more than two principals required for 51% ownership, please photocopy this section, complete it for the other principals, attach it to your Form and have each of them sign as principals and personal guarantors below.			
First Owner Full Name (Mr, Mrs, Ms)		Title:	Social Insurance Number:
Date of Birth: (mm/dd/yy)	Phone:	Are You a Property Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	% Business Ownership:
Address:	City:	Province/Territory:	Postal Code:
Second Owner Full Name (Mr, Mrs, Ms)		Title	Social Insurance Number:
Date of Birth: (mm/dd/yy)	Phone:	Are You a Property Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	% Business Ownership:
Address:	City:	Province/Territory:	Postal Code:
Identification Required: Two pieces of signed valid identification (one piece must have a photograph) for all individuals who are signing the Form (Identification must be issued by the government of Canada or a Canadian province or territory).			
1st Owner:			
Identification Type 1	Identification #	Place of Issuance	Identification Type
			Identification #
			Place of Issuance
Identification Type 2	Identification #	Place of Issuance	Identification Type 2
			Identification #
			Place of Issuance
Deposit Account (Primary Account) Same as VOID Cheque <input type="checkbox"/> Route #: _____ Transit #: _____ Account #: _____			
Other Depository/Savings Accounts (Specify Details): Route #: _____ Transit #: _____ Account #: _____			

B. MERCHANT LOCATION INFORMATION

Location: Mall Shopping Area Office Apartment Isolated Home Other (specify): **trade shows**

External Facility Description (# of Levels/Floors): 1 2-4 5-10 11+ Merchant on: Ground Fl Other: _____

Advertising Name Displayed:
 Window Door Store Front Seasonal: No Yes — Months Open Between _____ to _____

Approximate Square Footage:
 0-250 251-500 501-2,000 2,001+

C. SERVICES REQUESTED

1. Business Summary: Please provide a brief summary of your core service and/or product:

Comments to Credit Officer:
if -- customer's credit is not great --- delay payment of credit cards for 7 days. Otherwise please pay as usual

2. Processing Details

a. Type of Transaction: Internet _____% MOTO (Mail/Telephone) or Keyed Transactions _____% Swiped Transactions **100**% Recurring Billing _____%

b. Do your customers pay in advance for products/services? Yes No If Yes, what percent? _____%
 What is the average number of days for delivery of product or fulfillment of service from date of payment? _____ days

c. How long from the time of payment are the products/services delivered/fulfilled? 0-7 days **100**% 8-14 days _____% 15-30 days _____% 30+ days _____%

d. Do you have a refund policy for Credit Card Sales? Yes No If Yes, check all that apply: MC/Visa/Discover Credit Store Credit Exchange Others

e. Within how many days of the original purchase date do you submit refunds for MC/Visa transactions? 0-3 days **100**% 4-7 days _____% 8-14 days _____% Over 14 days _____%

C. SERVICES REQUESTED (cont'd)

3. Annual Sales by Category

Total Annual Volume		Annual Volume Card Type		For Multiple Locations Only	
All Cash & Card Sales:	\$ 100,000	Visa Volume:	\$ 25.00,000	Annual Visa Volume this Location:	\$ _____,000
All Credit: (excludes Third Party)	\$ 40,000	MC Volume:	\$ 15,000	Annual MC Volume this Location:	\$ _____,000
All Debit:	\$ 60,000	Discover Network Vol:	\$ _____,000	Annual Discover Network Vol. this Location:	\$ _____,000
Average Credit Trans. Size:	\$ 40.00	Interac Volume:	\$ 60,000	Annual Interac Volume this Location:	\$ _____,000
Average Debit Trans. Size:	\$ 40.00				

D. PRICE SCHEDULE

* Merchant Processing Fees and Card Brand Fee are rates that apply to the total annual card volume processed. Each processing fee is inclusive of our processing fee, Association, Interchange rates (based on type of card presented) and other Association fees and Assessments. All these fees apply to Visa/MC domestic and Discover foreign electronic consumer transactions settled within the Associations' required time frames. Any transactions clearing at a higher interchange level will be charged a Non-qualifying Surcharge and any Interchange adjustments (as applicable). For further information, see "Article V Service Fees and Charges" of your terms and conditions. All prices listed are subject to applicable taxes.

a. Merchant Services Processing Fees; Currency (select one): CAD USD

Entitlement	Discount	Per Transaction	Existing Merchant ID
Visa Credit*	1.69 %	\$	
MasterCard Credit*	1.69 %	\$	
Discover Network*	%	\$	
Visa Debit*	1.69 %	\$	
Card Brand Fee*	0.10 %	\$	
Non-Qual Surcharge*	0.40 %	\$	
Interac Debit		\$ 0.05	
Amex, JCB		\$	
Other:		\$	

Gift Card: VxSeries - GiveX Application Value Link Application

I-Plus Entitlement		Per Transaction	Existing Merchant ID
Visa - I-Plus	bps +	\$ per/trxn (if applicable)	
MC - I-Plus	bps +	\$ per/trxn (if applicable)	
Discover - I-Plus	bps +	\$ per/trxn (if applicable)	

b. Other Services/Products

Monthly Service Per Item	Fee	Monthly Service Per Item	Fee	Additional Services	Fee
Application Fee Per Entitlement	\$	Monthly Funds Transfer Fee	\$	Chargeback/Occurrence	\$ 25
Monthly Minimum Per Entitlement	\$ 20	Optional Monthly Funding	\$	Imprinter (Purchase only)	\$
Monthly Account Fee Per Entitlement	\$	Account Authorization Fee	\$	Batch Fee	\$
Mailed Statement Monthly Fee/Entitlement	\$	Annual Fee	\$	Credit Refund Fee/Trans	\$ 0.05
Maintenance Fee/Month	\$	GPRS Data = Units _____ x \$ _____ / Mo. =	\$		

c. Equipment

Equipment Type/Name	Unit Price	Quantity	Purchase * Lease (check one)	Total	Seasonal / # of Months
Vx810 Duet (6' Cable)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
Vx810 Duet (8' Cable)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
Vx810 PIN Pad	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
Vx820 Contactless	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
VX670WCN + VX670BSBC (Terminal + Full Base)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
VX670WCN + VX670CHAR (Terminal + Std Base)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
VX670WCN (Terminal Only)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
VX670 GPRS + vx670BSBC (Terminal + Full Base)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
VX670 GPRS + vx670CHAR (Terminal + Std Base)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
VX670 GPRS (Terminal Only)	\$ 39.99	1	P <input checked="" type="checkbox"/> L	\$ 39.99	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
Vx670 GPRS Car Charger (Purchase only)	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
K23 PIN PAD w Base	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
K23 PIN PAD	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____
Other:	\$		P L	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No / _____

Terminal Set Up: Terminal Language (English/French) UK Communication Type (IP/Dial) _____ Dial Access: 9 1 Other: _____
 Auto Balance: Yes No If yes, 20:00 (00-23 hours) Debit Cash Back: Yes No
 Server Prompt: Yes No Tip Prompt: Yes No Invoice Number Prompt: Yes No QSR Flag: Yes No Other: _____
 Imprinter Type: Standard Quantity: _____ Mini Mobile Quantity: _____ Debit Surcharge: Yes No Fee Amount: _____
 Terminal Shipping & Special Instructions: _____

Lease Company: (04) First Data Global Leasing Lease Term: 48 Months Annual Tax Handling Fee: \$10.20
 Monthly Payment (OAC/Unit/MO) for this location: \$ 39.99 w/o Taxes, late fees, or other charges that may apply.
 * See Multiple Locations form for the Monthly Lease Charge for each individual location. See lease agreement for details.
This is a NON-CANCELABLE lease for the full term indicated. Client's Initials: _____

E. ADDITIONAL INFORMATION (cont'd)

MERCHANT SIGNATURES

Please review your terms and conditions when you receive them and contact us, toll free, at 1-888-263-1938 if you have questions. You will accept and agree to be bound by them after we provide you with the Services, for the first time. At any time, you can review the terms and conditions online at www.firstdata.com/canada, or call us toll free, at the number above, to request additional copies. **You hereby waive the "Pre-notification/Confirmation" requirements set out in Appendix II of Rule H1 ("Pre-authorized Debits") of the Canadian Payments Association. The statements made on your Form are true. You acknowledge having read your Form, and agree to be bound by all provisions printed herein. You warrant that any individual signatory is authorised to sign your Form on behalf of the Merchant.**

Signature of Business Principal (please sign below)

Signature of Business Principal (please sign below)

X _____

X _____

Name of Signer

Name of Signer

Title _____ Date _____

Title _____ Date _____

X _____

X _____

Name of Signer

Name of Signer

Title _____ Date _____

Title _____ Date _____

PERSONAL GUARANTEE (To be used in all Provinces except Alberta)

In consideration of First Data Ltd. and its affiliates (collectively, the "Creditors") acceptance of the Agreement, each of the undersigned unconditionally and irrevocably guarantees, jointly and severally, and for Quebec purposes, solidarily, forthwith upon demand by the Creditors, performance of the Merchant's (Identified above) obligations under the Agreement (as it may be amended, modified, renewed or supplemented from time to time) including for greater certainty, amounts owing under any lease, rental or purchase of Equipment under the Agreement whether from an affiliate or otherwise, and prompt payment of all debts, liabilities and obligations due from the Merchant to the Creditors (or their affiliates) under or pursuant to the Agreement (collectively, the "Merchant Liabilities"). Each of the undersigned's obligations under this guarantee are continuing, unconditional, absolute and irrevocable and without limiting the generality of the foregoing shall not be released, discharged, limited or otherwise affected by and each undersigned hereby waives to the greatest extent permitted by law, any act or omission of any person or any other circumstance whatsoever which might constitute a legal or equitable discharge, limitation or reduction of the undersigned's obligations hereunder or which may operate (whether by statute, at law, in equity or otherwise) to release, discharge, diminish, limit, restrict or in any way affect the liability of, or otherwise provide a defence to, a guarantor, a surety or a principal debtor, other than the due payment and performance in full of all of the Merchant Liabilities. Without limiting the generality of the foregoing, the Creditors may, with respect to the Merchant Liabilities, without any requirement to give notice to or obtain the consent of any of the undersigned and without releasing or diminishing the liability of any of the undersigned hereunder: (i) alter, amend or vary the Merchant Liabilities, in the Agreement; (ii) grant time, renewals, extensions, indulgencies, releases or discharges to the Merchant, any other guarantor or to any other person; (iii) create new or additional Merchant Liabilities or increase any rates or fees payable in respect of the Merchant Liabilities; or (iv) otherwise deal with the Merchant, any guarantor, any other person, the Merchant Liabilities, the liabilities and obligations of any guarantor, all as the Creditors may see fit. Each of the undersigned waives any benefit of division and discussion.

Each of the undersigned also hereby waive notice of any transfer or disposition of the Merchant Liabilities or any part thereof and waive all presentments, demands for performance or payment, notice of default, notice of dishonour, notice of non-payment and all other notices or formalities.

Each of the undersigned agree to indemnify the Creditors for all amounts, claims and losses which the Creditors may incur or be subject to arising out of or in connection with the default by the Merchant in the payment or performance of the Merchant Liabilities. In addition, each of the undersigned irrevocably renounces any rights they may have to be released from this Guarantee under Article 2362 of the Civil Code of Quebec and agree to renew the Guarantee hereunder at the request of the Creditors by executing such documents as the Creditors may request from time to time. This Guarantee shall enure to the benefit of, and be binding on, each of the undersigned and their successors and assigns and shall enure to the benefit of and be binding on the Creditors and their successors and assigns. The undersigned may not assign this Guarantee and any of his/her rights or obligations hereunder. The Creditors may assign this Guarantee and any of their rights and obligations hereunder to any person that replaces either or both of them in their capacity as Creditors. This Guarantee is binding on the guarantors' heirs, administrators and executors. Each undersigned hereby also agrees to all other provisions in the Agreement, which relate to guarantors.

Each of the undersigned hereby authorizes and consents to the Creditors or any of them obtaining credit, financial and related personal or business information (including a credit information report) about the undersigned from any credit bureau or credit reporting agency in connection with this Guarantee to assess the undersigned(s) current and ongoing credit worthiness and further consent to the collection, use and disclosure of Personal Information as described in the "Confidentiality" section of the Agreement and in the First Data "Privacy Principles" available at the web site address www.firstdata.com/canada or toll free at 1-888-263-1938.

X _____, an individual X _____, an individual