CYBERAUTHORIZE

Authorize.Net Payment Gateway Only Account Set-up Form – Part 1

Complete both pages, and fax (904)620-9067 or email back to sales@cyberauthorize.com.

Company Information

Date: _____

Company Name:_____

DBA: _____

Address; _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

Website Address(URL): _____

Business Type (Circle One):   C-Corp   S-Corp   LLC   Partnership   Non-Profit   Govt/Agency   Trust

Date Business Established: Month _____ Year _____

Description of Service: _____

Company Tax (EIN) or SS #: _____

Primary Contact: _____

IT/Technical Contact: _____

Processing Method: (Check All that Apply): _____eCommerce _____ MOTO

Requested Add-On Services : _____ eCheck.Net _____Recurring Billing _____ CIM _____ AFDS

Corporate Officer/Owner/Principal Information

Name: _____

Title: _____ Phone: _____

Email: _____Birth Month _____

Billing Information:

Authorize.Net will bill the Checking Account directly on the 1st of every month.

Name on Checking Account: _____

Account Type: (Check One) _____Business _____ Personal

ABA Routing (9-Digits): _____

Account Number: _____

Bank Name: _____

Bank City: _____ State _____ Zipcode _____

Authorize.Net Payment Gateway Only Account Set-up Form – Part 2

MERCHANT ACCOUNT PROCESSOR CONFIGURATION INFORMATION

Please provide the merchant account network information that your current merchant account is associated with. Your merchant account provider (processor) must provide this information to you. Please request a THIRD-PARTY VAR SHEET with the required information, or complete the form.

FIRST DATA CORP (FDC)-Nashville Platform

Merchant Account Bank or Acquirer Name: _____

Merchant ID (MID): _____ (7-11 Digits)

Terminal ID (TID): _____ (7-11 Digits)

FIRST DATA CORP (FDCO)-Omaha Platform

Merchant Account Bank or Acquirer Name: _____

Merchant ID (MID): _____ (15-16 Digits)

ELAVON

Merchant Account Bank or Acquirer Name: _____

Bank BIN/Terminal BIN#: _____ (6-Digits)

Terminal ID (TID): _____ (16-Digits)

TSYS (Formerly VITAL)

Merchant Account Bank or Acquirer Name: _____

Merchant Number: _____ (12-Digits)

Acquirer BIN: _____(6-Digits)   Category Code: _____ (4-Digits)

Agent Bank Number: _____ (6-Digits)   Store Number: _____ (4-Digits)

Agent Chain Number: _____ (6-Digits)   Terminal ID (TID): _____ (4-Digits)

Global

Merchant Account Bank or Acquirer Name: _____

Acquirer Institution ID# (Bank ID#): _____

Merchant ID (MID): _____

Paymentech

Merchant Account Bank or Acquirer Name: _____

Merchant # (Gensar #) : _____ (12-Digits)

Client Number _____ (4-Digits)   Terminal Number (TID) _____ (3-Digits)

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