SECURENET PAYMENT SYSTEMS

Schedule of Fees and Terminal Information

SCHEDULE OF FEES†

CREDIT CARD %	CHECK CARD %	PASSTHROUGH	AUTHORIZATION FEES
Rate 1:	Rate 1:	+ %	VISA/MC/DISC: /each
Rate 2:	Rate 2:	Rate is above interchange.	AMEX: /each
Rate 3:	Rate 3:		Dial Access: $0.01/each
†All Visa, MasterCard & Discover Network Dues, Assessments, Access & Branding Fees are passed through at cost.			Address Verification (AVS): /each

OTHER FEES		STANDARD FEES	
Service & Support: /month	Activation (one time):	ACH Return Item: $30.00/each	Notice of Change: $30.00/each
Online Reporting: /month	VISA/MC NQ Surcharge: /each	Chargeback: $25.00/each	Minimum Discount: $25.00/month
Batch Settlement: /batch	Monthly Discount: 0.05% ☐ Apply	Retrieval: $10.00/each	VISA/MC BIN: 0.01%/gross

PIN DEBIT	WIRELESS	SECURENET OTHER SERVICES
Per Item: $_____ + _____%	Activation (one time):	Soft Descriptor: /month
Activation (one time):	Service & Support: /month	SecurePay Hosting: /month
Service & Support: /month	Per Transaction:	Batch Processing (SFTP): /batch

SECURENET VIRTUAL TERMINAL

SECURENET VIRTUAL TERMINAL	SECURENET VAULT	RECURRING BILLING	TOUCHPAY
Activation (one time):	Activation (one time):	Activation (one time):	Activation (one time):
Service & Support: /month	Service & Support: /month	Service & Support: /month	Service & Support: /month
Per Transaction:	Per Account on File: /month	Per Transaction:	Per Transaction:

TERMINAL INFORMATION

VIRTUAL TERMINAL/ POS SOFTWARE	QTY
SecureNet Virtual Terminal	
SecureNet Virtual Terminal- SPOS POS Software	
Other:	

MAKE	MODEL	QTY REPROGRAM	QTY NEW	CUSTOM OPTIONS		
Hypercom				☐ Retail	☐ Restaurant	☐ CVV/CVC Prompt
Verifone				☐ Purchasing Card	☐ Tip Option	☐ IP Connection
Other:				☐ Invoice Number	☐ Server/Clerk	☐ Auto Close __ __:__ __ AM/PM

MERCHANT INFORMATION

Merchant ID Number (New Merchants- N/A; Existing Merchants- 16 Digits):		
"Doing Business As" Name:	Location Address (No P.O. Box)	
City	State	Zip
Agent Name	Date*	

By signing below, I agree to the Schedule of Fees above as well as to all new equipment orders.

By:

X _____ _____

Individual Signature (#1 from application) Date

* Pricing presented here remains valid for 30 days if unsigned.