



X Charge – Merchant Worksheet / Please return by fax: 1(702) 446-8559
Attention: Patrick Ortega

Legal Business Name _____		Merchant "Doing Business As" Name _____	
Legal Address _____		Location Address _____	
City/State/Zip _____		City/State/Zip _____	
Phone _____	Fax _____	Phone _____	Fax _____
Years in Business _____	Corp / Partnership / Sole P _____	# of Locations _____	Tax ID# (9 digit no.) _____
Main Contact _____		Email Address _____	
Cell Number _____		X-Charge Install Date _____	

BANK CARD INFORMATION

American Express MID# _____	Discover MID# _____
<i>(To establish new account call 800-528-5200, enter 10 digit ID above)</i>	<i>(To establish new account call 800-347-6673, enter 15 digit ID above)</i>
Diner's Club # _____	Other Cards Accepted _____
Estimated Annual MasterCard/Visa Sales _____	Estimated Average Ticket _____

OWNER / OFFICER

Name _____	DOB _____	Social Security # _____ - _____ - _____
Home Address _____		City/State/Zip _____
Home Phone _____	Years There _____	Do you own or lease? _____

Processing Type: ___ IP (Internet Protocol/Broadband with Secure Gateway) ___ Dial Up (Modem)

**Please fax a voided check for your deposit account
along with this worksheet**