

Required Deployment Form

Please submit completed forms electronically to deploymentforms@paysafe.com

Date: _____ Request Type: New Account Upgrade/Additional TID Bulk Order
Contact Name: _____ Phone Number: _____
Agent Name: _____ Agent Number: _____
DBA/MID: _____ Merchant Contact Name: _____

Shipping Information:

Ship to: Agent Office Merchant Location
Contact: _____ Business Name: _____
Address: _____ Suite/Floor #: _____
City / State / Zip: _____ Recipient Phone #: _____
Recipient Email (for delivery notifications): _____
Shipping Method:
 Ground (\$15) Express Saver (\$22) 2-Day (\$30) Standard Overnight (\$45) Priority Overnight (\$50) Priority Saturday (\$70)

Billing Information:

Bill to: Agent Merchant (no markup available)

Please charge credit card for purchase.

Please ACH Bank DDA for purchase.

(See separate authorization form - this is required.)

Agent costs are base on signed pricing addendum on file. Merchant cost indicated above plus tax and shipping.

Equipment Information:

Platform: Omaha Nashville TSYS (approval needed) Buypass (for WEX, Voyager and Fleet) North

QTY	OWNERSHIP	EQUIPMENT	QTY	OWNERSHIP	EQUIPMENT
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Software/POS System: _____ Software Version: _____

Gateway/Middleware Name: _____

File Build Specifications:

Application: Retail Retail w/tip Restaurant MOTO Lodging Small Ticket/QSR
 E-Commerce Voyager/WEX Multi-merchant Other: _____

Additional Features: PIN Debit Internal or External PIN Pad: _____ EBT (FNS# Required): _____ EBT Cash Only
 Connection: Dial-up Wireless WiFi IP

Special Prompts: Tip Prompt Suggested Tip Tip Line Server # AVS Dial 9 Surcharge %: _____
 Cash Advance %: _____ Fraud (last 4 digits) Auto-Close/Auto Close Time: _____ Invoice

Additional Comments

