



*"Making Payment Processing
Simpler, Better, and Faster."*

6355 Topanga Canyon Blvd, Suite 324
Woodland Hills, CA 91367
(800) 528-1782

Pre-Application Instructions

1. Complete the Merchant Pre-Application
2. Include marketing material if applicable
3. Include a preprinted voided business check or a letter from your bank verifying the routing number and account number.
4. Include a photo copy of your driver's license
5. Please complete, sign, date, and return all of the required information via fax @ 818-702-0027 or email at support@ccimerchant.com.



6355 Topanga Canyon Blvd., Suite 324
 Woodland Hills, CA. 91367
 Phone: 818.702.0024
 Fax: 818.702.0027
 support@ccimerchant.com

Merchant Pre-Application

Applying for a new merchant account is fast and easy! With our Merchant Account Pre-Application, you can start accepting credit cards within 2-3 business days. Simply complete the form below, submit, and you will receive a completed application for your review and signature. If you have any questions please contact your sales rep or call us at (818) 702.0024

*All information you provide will be kept private and confidential. Credit Card Industry never shares or sells personal data at any time.

Business Legal Name:	<input type="text"/>	Phone:	<input type="text"/>
Business DBA Name:	<input type="text"/>	Fax:	<input type="text"/>
Business Address:	<input type="text"/>	Email:	<input type="text"/>
City, State, Zip:	<input type="text"/>	Year Est.	<input type="text"/>
Contact Name:	<input type="text"/>	Tax ID:	<input type="text"/>

Circle One for LLC

1099 Reporting: Sole Proprietor Sub S Corp Closely Held Public Corp LLC **D, C, or P**

Product Sold:	<input type="text"/>	<input type="text"/>	% Card Present
Anticipated Volume:	Average Sale Amt: \$ <input type="text"/>	Average Monthly: \$ <input type="text"/>	<input type="text"/>
Website:	<input type="text"/>	<input type="text"/>	% Internet/MOTO

Must comply with Website Compliance Questionnaire

***Must equal 100%**

Checking Routing#:	<input type="text"/>	Account#:	<input type="text"/>
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Include copy of voided check

Will your business be accepting American Express?
 How will you connect the terminal?
 Are you interested in an ATM for your business?

Owner/Officer Information:

Owner/Officer Name:	<input type="text"/>	Title:	<input type="text"/>
Home Address:	<input type="text"/>	SSN#:	<input type="text"/>
City, State, Zip:	<input type="text"/>	Date of Birth:	<input type="text"/>
Phone:	<input type="text"/>	Percentage of Ownership:	<input type="text"/>

I acknowledge that I am the business owner or authorized officer of the above referenced business and the information is true and correct. I agree that CCI accepts no liability for the consequences arising out of erroneous or incomplete information supplied by me.

Printed Name: _____ Date: _____

Internal Use Only	
Date Received:	<input type="text"/>
Underwriter:	<input type="text"/>
Application created & sent:	<input type="text"/>
Missing documentation:	<input type="text"/>