



Merchant Management Systems, Inc.®  
 2021 13<sup>th</sup> Street ♦ Ashland, Kentucky 41101  
 (800) 795-6899 ♦ (606) 325-1199 ♦ FAX (606) 324-7903 ♦ WWW.onlinewithmms.com

**FOR INTERNAL USE ONLY**

Original Approved Merchant ID \_\_\_\_\_ Additional Outlet Merchant ID \_\_\_\_\_

FEIN: Same as Lead Account  Legal Entity: Same as Lead Account (both items must be checked in order to use this form)

**MERCHANT ADDITIONAL OUTLET APPLICATION**

DBA \_\_\_\_\_ MCC \_\_\_\_\_

Additional Location Address \_\_\_\_\_

Additional Location Contact \_\_\_\_\_ Additional Location Phone \_\_\_\_\_

URL \_\_\_\_\_ Email \_\_\_\_\_

Product/Service Description \_\_\_\_\_

Monthly Bank Card Volume \$ \_\_\_\_\_ Avg. Ticket \$ \_\_\_\_\_

Sale Method: Card Swiped \_\_\_\_\_ % Imprint \_\_\_\_\_ % Mail Order \_\_\_\_\_ % Telephone Order \_\_\_\_\_ %

**DISTINCTION FROM LEAD ACCOUNT**

Different Address, same transaction type  Same Address, Different transaction type  Different Address, Different transaction type

*Any account adding more than 20% incremental volume to their existing processing may require additional signoff as indicated in Appendix "B" of the Merchant Policy Agreement*

**BANK ACCOUNT INFORMATION**

ABA #: \_\_\_\_\_ DDA #: \_\_\_\_\_ Authorized Signor: \_\_\_\_\_

DELIVERY TIMEFRAME DETAILS OR DEPOSIT % (if applicable): \_\_\_\_\_

**ADDITIONAL OUTLET ACCEPTANCE**

I/We hereby authorize Merchant Management Systems, Inc. to add the additional outlet location listed above to my/our credit card processing account. I/We understand that all terms and conditions set forth in original application apply to this location.

MERCHANT: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Signature of Office/Owner)

\_\_\_\_\_  
 (Print Name)

**ACCEPTANCE BY MERCHANT MANAGEMENT SYSTEMS, INC.**

MMS: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Signature of Office/Owner)

\_\_\_\_\_  
 (Print Name)