Accounts Receivable AR03



MERCHANT ID & POINT-OF-SALE (POS) REQUEST FORM

Purpose of Form: The Merchant ID and Point-of-Sale (POS) terminals are options for departments to provide their customers additional modes of payments (debit/credit cards, online, etc.). Please use this form when you wish to request a Merchant ID and POS machine. 1. Requestor Information: Ext: _____ Email: ____ Name: _____ Department: 2. The Purpose of Inquiry: > Provide information on why you need the machine? > Do you already posses any machines? Yes □ No □ 3. Point-of-Sale Terminal and Payment Processing Online Information: > There are two options in which payments can be processed: Point-of-Sale Terminal or Payment Processing Online. Below are the links where you can find the information about the machines available: POS terminal payment: https://en.chasepaymentech.ca/pos payments.html Online payment processing: https://en.chasepaymentech.ca/online-payment-processing.html > Please choose the payment processing type and product you want to use: POS terminal payment Please select an item. Online payment processing Please select an item. > If the POS terminal payment is selected above, how many machines will you require? > Please provide the account in which the monthly equipment and bank fees will be charged:

4. Authorization:	
Your typed name below indicates your approval of the form and	confirms that all information is accurate.
Name:	Date:
Department:	
Once completed, please submit this form to Accounts Receivable / Finance Department: Gail.Puskas@uwindsor.ca	
If there are any questions while filling out the form, please or by email at Gail Puskas@uwindsor.ca	contact: Gail Puskas by phone at ext. 2125
FINANCE DEPARTMENT USE ONLY	
Approved by:	Date:
Comments:	
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