

## MERCHANT REQUEST TO ADD CARD TYPE

Date: Elavon  
Please complete and sign below, then 7300 Chapman Highway  
Fax to: 514-227-5091 or email Knoxville, TN 37920-6612  
support@palladis.ca Attn: MSP Support  
Attn: MSP Support --- OR--- mail to:

I hereby request that the following card types be added to the merchant processing account for the business indicated below. I understand that by requesting the ability to accept these card types through my POS device, I am responsible for any errors that may occur as a result of incorrect card type merchant numbers entered by me below. I am also responsible for all authorization fees (if applicable) to be billed on the monthly statement. I further understand that the card companies will pay me for these transactions and collect any fees directly from my account. I acknowledge that Elavon Merchant Services Canada is not liable for any billing or payment errors made by the card companies in the processing of these transactions.

I,            \_\_\_\_\_ certify that I am the owner (if privately owned) or the authorized officer (if incorporated), and have the authorization to make adjustments to this account.

Signature \_\_\_\_\_ Date Oct. 5, 11 Title

Name of Business:

Merchant ID#:

Date of Request: Oct. 5, 11

Contact Name:

Address:

City:

Province:

Postal Code:

Telephone#:

Fax#:

Email address:

Sales Rep#:

**Please, provide card type merchant numbers (SE #'s) to be added:**

	<u>Auth Fee</u>	<u>Auth Fee</u>
Discover: 60110 _____	_____	Amex: _____ 0.15
Diners/Carte Blanche: _____	_____	JCB: _____ _____