APPLICATION FOR AUTHORIZATION TO PROCESS
BANK CARD TRANSACTIONS

(CHECK ONE)

☐ (ONLINE WEB PAYMENT) <u>COMMERCE</u> <u>MANAGER</u>

☐ CARD SWIPE TERMINAL

Complete this application to request authorization to accept credit card payments. A new merchant number will be requested if this application is approved.   A separate merchant ID is specifically required for online transactions. If you are already accepting online payments using Commerce Manager please check the box below. At this time, MSU accepts VISA, MasterCard, Discover & American Express. Please see MSU Business Procedures Manual section #370 for more information. All of the information and signatures must be provided to University Business Services (UBS) for review before approval for acceptance of credit card payments can be extended.

Check here if you are currently using Commerce Manager ☐

Department making the request: _____

<u>Will take 3 to 4 weeks setup time</u>

Acct Manager responsible for credit card payments:

Name _____

Department PO Box/Address_____
_____

Phone _____Fax _____

Email _____

Activity for which credit card sales are proposed:

_____

Index and account to be credited for sales:

_____   _____
  Index   Account

Index to charge merchant fees: _____

Active months for activity: _____

Avg. transaction amount ($): _____

Est. Monthly volume ($):_____

Do you want to collect a convenience fee? Yes   No
(can only be used with Commerce Manager)   **(check one)**

If yes? How much? _____

Email_____ This email address will be used to send daily reports to your department for reconciliation purposes (Commerce Manager). It will be up to the department to reconcile their data with amounts receipted into Banner from the Commerce Manager End of Day reports. Requester please initial here and provide Banner User ID. _____

I HAVE READ THE POLICIES GOVERNING THE USE OF CREDIT CARDS AND THE POLICY ON SAFEGUARDING CUSTOMER INFORMATION. I AGREE TO ABIDE BY THEM. IN THE EVENT I FAIL TO FOLLOW ALL PROCEDURES I UNDERSTAND THE ABILITY TO PROCESS BANKCARD TRANSACTIONS MAY BE REVOKED.
Please sign and date below.

 Requester:_____   **Department Head/Dean: _____**
                                Date   **Date**

Please note the following before you complete the application for Commerce Manager

1. The department must have an idea or rough draft of what the website is to look like.
2. The rough draft should be approved by all parties involved.
3. There must be only one point of contact to discuss changes to the website during the development process.
4. There are only 10 fields that can collect responses. Each field is limited to 50 characters.
5. It is the responsibility of the requesting department to link Commerce Manager to their web page.
6. It will take 3 to 4 weeks from the start of the process to completion.

Departmental Web Page Information (UBS use only)

Departmental Web Page Design Contact Person _____

IP address _____

Web page URL connecting to Commerce Manager _____

Redirect URL in TEST_____

Return this form to University Business Services at UBSHelp@montana.edu   Revised 04/2021

Redirect URL in Production_____

Purchased software: _____

Software vendor technical contact: _____
                                      Name   Phone

MID and Order Type (UBS use only)

Merchant ID #_____

Order Type Name _____

Comments_____