



CARD ADDITION/CHANGE REQUEST FORM

IMPORTANT - PLEASE READ BEFORE PROCEEDING: ALL INFORMATION LISTED IS REQUIRED AND MUST BE COMPLETED. PLEASE FAX THIS REQUEST FORM TO NEW ACCOUNTS AT **(231) 941-4204**. THIS REQUEST WILL NOT BE EFFECTIVE UNTIL THE SIGNATURE HAS BEEN VERIFIED BY IPAYMENT. Thank you for your cooperation.

Merchant Name: _____

Merchant Number: (Required) _____

American Express:

Please check one: Add Change

Merchant Account # / SE Number _____

Discover Card:

Please check one: Add Change

Merchant Account # _____

Diners Club / Carte Blanche:

Please check one: Add Change

Merchant Account # _____

Japanese Credit Bureau (JCB)

Please check one: Add Change

Merchant Account # _____

Signature of Authorized Principal
 (as specified on the Merchant Application/Agreement)

Date

If you should have any questions, please contact our Merchant Services department at **(866) 964-1622** or email us at **support@1nps.com**