



ATM APPLICATION

Terminal Location

<u>Legal Business Name</u>		<u>Doing Business As</u>	
<u>Business Address</u>		<u>City / State / Zip</u>	
<u>Terminal Location Owner's Name</u>	<u>Terminal Location Contact Person</u>	<u>Terminal Location Phone #</u>	<u>Cell Phone #</u>
<u>Nature of Business (Type of goods or services sold)</u>	<u>Terminal Location Owner's SSN / EIN</u>	<u>Type of Ownership</u> Sole Prop Partnership LLC Corp. Not for Profit	

ATM Equipment Information

***REQUIRED IF YOU WANT BEI TO PROGRAM TERMINAL**

Make: Hyosung Genmega Triton Hantle/Tranax	*Communication Type: Dial TCP/IP Wireless: _____ Wireless Provider
Model:	*Dispense Limit: \$ _____ (minimum \$200.00)
Serial Number: ATM _____ Keypad _____	*DCC: YES NO
Software Version:	Is Terminal EMV Compliant: YES NO
*Cassette Size: 1K 2K 4K	*Operator Password: _____ (must be 6 digits)
*Denomination: \$5 \$10 \$20	*Message Format: Enhanced Standard 1 Standard 3

Surcharge Information

Surcharge Amount: \$ _____	<u>Surcharge Distribution</u>	
Surcharge Frequency: (please check one below)	<u>Customer Name</u>	<u>Amount</u>
Daily ACH Monthly ACH		\$ _____
Monthly Check (Payable To: _____)		\$ _____
*Note: Surcharge checks are issued on the 15 th of the following month		\$ _____

Special Instructions:

Authorization & Release

Business Purpose I acknowledge that this application is solely for the purposes of business and no other use.
Release I authorize BEI to release any information requested concerning personal or business standing.

Signature: X _____ Date: _____