

**Merchant Processing Agreement
 ADDITIONAL LOCATION FORM**

When the same business is adding a new location with no change of processing information.

Merchant # _____

Office #: _____

***** Original Signer Must Sign For All Additional Locations *****
 ** Merchant Account Entry Form must be included **

Business Information

Business Legal Name: _____
 Business DBA Name: _____
 Mailing / Business Address: _____
 City, State, Zip Code: _____
 Contact Name: _____
 Phone #: _____ Fax #: _____
 Location Address: _____
 City, State, Zip Code: _____
 Contact Name: _____
 Phone: _____ Fax #: _____
 Corporate Merchant ID #: _____

Electronic Debit/Credit Authorization

Merchant hereby authorizes Bank, in accordance with the Merchant Processing Agreement to initiate debit/credit entries to Merchant's deposit account, as indicated below this account will be deemed the "Designated Account" for all purposes under the Merchant Processing Agreement. This authority is to remain in full force and effect until (a) Bank has received written notification from Merchant of its termination, in such a manner as to afford Bank reasonable opportunity to act on it and (b) all obligations of Merchant to Bank that have arisen under this Agreement have been paid in full.

**Checking Account Only – If Different From Original Set Up
 A Voided Check From This Account Must Be Attached**

Bank Name and Phone #: _____
 Address, City, State, Zip Code: _____
 Transit #: _____ DDA #: _____

I (print name) _____ hereby authorize SignaPay to add this additional location to my current credit card processing account. I understand that, all terms and conditions set forth in my original application, and in the original Merchant Processing Agreement, including but not limited to the Personal warranty apply to this additional location.

Signature: _____ Title: _____ Name: _____ Date: _____

Signature: _____ Title: _____ Name: _____ Date: _____