

MERCHANT APPLICATION FORM

Please complete this form and provide documentary evidence as appropriate. Submission of fraudulent documentation and false information will lead to denial of service.

Instructions

- Complete this form in block letters.
- Attach copy of personal identification (driver's license, National Id or International passport).
- Attach copy of utility bill for address verification.

Section A: Website Information I

Website Name.....

Website URL.....

Company Name.....

Type of Ownership (Tick as appropriate)

- | | | |
|--|--|---|
| <input type="checkbox"/> Sole Ownership | <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Public Liability Company |
| <input type="checkbox"/> Non Profit Organisation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Government |
| <input type="checkbox"/> Other (Specify)..... | | |

Business Location (Tick as appropriate)

- | | |
|---|-------------------------------|
| <input type="checkbox"/> Office | <input type="checkbox"/> Home |
| <input type="checkbox"/> Other (Specify)..... | |

Business Address.....

.....

Office Telephone.....

Office Email.....

Section B: Website Information II

IP Address (Tick as appropriate)

☐ Static ☐ Dynamic ☐ Not Sure

Website Development Platform

☐ PHP ☐ ASPX (C#) ☐ Java/JSP

☐ ASPX (VB.net)

☐ Other (Specify).....

Goods and services Sold on the Site:

Shopping Cart Provider.....

Method of Goods/Services Delivery (Tick as appropriate)

☐ Online Download ☐ Courier

☐ Other (specify).....

Number of Days until Product/Service is Delivered.....

Customer Refund Policy (Tick as appropriate)

☐ Exchange Only ☐ Refund within 30 Days

☐ Other (Specify).....

Any Other Information:

Section C: Contact Information

Name of Contact Person.....

Designation.....

Office Telephone/Extension.....

Mobile Phone.....

Email Address.....

Name of Developer.....

Mobile Phone.....

Email Address.....

I, on behalf of
hereby certify that the information provided on this form is true and accurate.

I agree that CashEnvoy reserves the right to take appropriate measures including legal actions if the information is discovered to be false.

Name.....

Designation.....

Signature.....

Date.....

Date:

The Managing Director
Electronic Settlement Ltd
13, Thorborn Avenue
Yaba
Lagos

Dear Sir,

LETTER OF COMMITMENT AGAINST FRAUD

On behalf of the organisation, whose name and address I have filled above, we hereby agree and promise to assist CashEnvoy to totally eliminate fraud and fraudulent activities by providing all requested information of suspected individuals and denying such individuals service.

Yours Faithfully,

Signature and Date

Name:

Position: