



Internal Use Only

Stand-alone Terminal Change Request

Request Type

Terminal Return

Terminal Replacement

Terminal Addition

Part 1 – Sales Application

| | |
|---------------------------|--|
| Date | |
| Sales Rep | |
| Merchant ID | |
| Merchant Name | |
| Qty of Terminals Involved | |
| Reason | |
| Approved by | |

Part 2 – Operations Use Only (please specify N.A. if not applicable)

| | |
|-----------------------------------|--|
| Existing Terminal(s) # | |
| Condition of Existing Terminal(s) | |
| Date of Deactivation | |
| New Terminal(s) # | |
| Date of Activation | |

Part 3 – Accounting Use Only (please specify N.A. if not applicable)

| | Qty / \$Amt | Signed Out / Approved by | Date |
|---------------------------------------|-------------|--------------------------|------|
| New Terminal Sign-out | | | |
| Old Terminal Sign-in | | | |
| Refund for Return | | | |
| Monthly Fee Termination for Return | | | |