

Merchant's Business Name (Legal): _____

SECTION 10 SCHEDULE OF FEES

APPLICATION Tiered[^] Flat Rate[¥] DISCOUNT: Daily Monthly CARD OPTIONS: All Cards Other Cards
 TYPE: Interchange⁺ Cash Advance Debit Card Only

BUSINESS TYPE Retail Restaurant Mail/Telephone Order** Internet**
 SUB BUSINESS TYPE Retail Key Entered** DialPay Capture** MOTO/CardSwipe** Large Ticket

VISA/MASTERCARD/DISCOVER (V/MC/D) Rate Category	Discount Rate	Transaction Fee	AMERICAN EXPRESS Rate Category*	Discount Rate	Transaction Fee		
Base	%	\$	Base	%	\$		
Mid-Qualified ¹ (Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants)	+	% + \$	Mid-Qualified ¹	+	% + \$		
Non-Qualified ²	+	% + \$	Non-Qualified ²	+	% + \$		
Base Debit NON PIN-Based ³ (Same as V/MC/D Discount Rate if left blank) Regulated Only ⁶ <input type="checkbox"/>	%	+ \$	<input type="checkbox"/> Wireless Service ³	Quantity	Setup Fee	Monthly Hosting Fee	Transaction Fee
<input type="checkbox"/> Debit PIN-Based ⁴	%	\$		\$	\$	\$	+\$
Monthly Fee \$			<input type="checkbox"/> Internet Services/ Micros ³	Quantity	Setup Fee	Monthly Hosting Fee	Transaction Fee
Qualified Rewards ⁵	%	Same as Visa/MC/ Discover Transaction Fee		\$	\$	\$	+\$

Transaction fees are charged for all transaction authorization attempts. ¹Added to Base discount rate and transaction fee. ²Added to applicable Mid-Qualified discount rate and transaction fee. ³Transaction fee is in addition to the applicable Base, Mid-Qualified, or Non-Qualified transaction fee, regardless of transaction qualification. ⁴Debit Network Interchange, sponsorship, switch and gateway fees, and any miscellaneous fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures. ⁵Same as Mid-Qualified discount rate if left blank for the applicable Reward categories collected by NPC (Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants).

***TIERED MERCHANTS ONLY** - Commercial Card transactions that do not meet the requirements to qualify for preferred rates will be assessed an additional fee of 0.50% (0.0050) on such sales volume. ⁶Regulated applies to all Base NON PIN debit transactions from issuers that are not exempt pursuant to 12 CFR Part 235. NON PIN debit transactions from exempt issuers will fall under the Base V/MC/D discount rate. If a rate is identified but the Regulated Only box is not checked, then this rate applies to all Base NON PIN debit transactions. **If the Retail Key Entered/MOTO/Internet/DialPay Business Type is selected, Rewards cards will be charged discount rates plus 0.11% (0.0011) on all transactions. NPC's processing fees and Card Brand interchange fees are included in the discount rate. All other Card Brand fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

+ INTERCHANGE MERCHANTS ONLY- CARD ORGANIZATION FEES:
 Visa, MasterCard and Discover Interchange fees, assessments and other fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

¥ FLAT RATE MERCHANTS ONLY - CARD ORGANIZATION FEES:
 All fees are included in discount rate and transaction fee above except fees related to International transactions. Does not apply to American Express.

***AMERICAN EXPRESS** - Existing American Express Number YES NO If Yes, Existing American Express Account Number: _____
 Annual Estimated or Actual American Express Volume <\$1,000,000.00 YES NO If No, Merchant is not eligible for the American Express Program.
 By checking this box, Merchant elects to opt out of the American Express Program
 By checking this box, Merchant elects to opt out of receiving American Express Marketing Materials.

SECTION 11 OCCURRENCE FEES

On File Fee /month	Retrieval/Chargeback \$15.00 /each	Paper Statement <input type="checkbox"/> Yes <input type="checkbox"/> No /month
Batch Fee ^{††} /each	Minimum Bill \$25.00 /month	Advantage Buyer Program ³ <input type="checkbox"/> /month
Voice Auth/DialPay /each	Early Deconversion Fee ¹ /each	PCI Fee <input type="checkbox"/> \$10.00 /month OR <input type="checkbox"/> \$120.00 /year
ACH/DBA Change Fee \$25.00 /each	Card Brand Usage Fee (NABU) ² \$0.06 /each	
Annual Fee Charged in Month of _____	1099-K Reporting is provided at No Charge	Regulatory Accounting Assistance Program (RAAP) Fee ⁴ Charged Annually Month of <u>March</u>

Return ACH(s) are subject to a \$25.00 fee for each occurrence. ¹The initial term of the Merchant Agreement is 3 years and automatically renews for additional 2-year periods. If this Agreement is terminated prior to the expiration of the initial term or any renewal term, you will be subject to an Early Deconversion Fee ("EDF") in accordance with the terms of Section 7.B. of the Terms and Conditions. If limited by state law, these fees may be modified in accordance with Section 7.B. of the Terms and Conditions. ²The Card Brand Usage Fee (NABU) includes the MasterCard Network Assessment and Brand Usage Fee, the Visa Acquirer Processing Fee, and the Visa Base II Transaction Fee and applies to Tiered Merchants Only. ^{††}Same as V/MC/D base transaction fee if left blank; if base V/MC/D transaction fee is left blank, the fee is \$0.30. ³See Schedule I of the Terms and Conditions for additional information. ⁴See Section 13 of the Terms and Conditions for additional information.

SECTION 12 MERCHANT ACKNOWLEDGEMENTS AND SIGNATURE

Merchant agrees that it is able to access, has reviewed and accepts all parts of the Merchant Processing Agreement including, but not limited to, the terms and conditions set forth in this Application and the Terms and Conditions made available below or via a separate link which are incorporated herein by reference (**GEN.E-Sig.0317**). Merchant agrees to the use of electronic signatures and agrees that such electronic signatures on the Merchant Agreement or other related agreements will have the same legal effect as if signed in ink. Merchant also agrees that an electronic or duplicate copy of such signatures may be used as evidence of execution of such agreements. Merchant represents, warrants and certifies to NPC and Member Bank that it has reviewed all 4 pages of this Application, that all information provided herein is true, correct and complete and that NPC and Member Bank may rely on the information contained in this Application, without further investigation, for all purposes. Merchant acknowledges and agrees that NPC and Member Bank are in no way responsible or liable for the actions, inactions, performance or lack of performance of any third party provider or independent sales representative. Merchant represents that it has chosen for itself any services, equipment or third party selected in connection with the Merchant Agreement, and it has not relied on any promises, representations, warranties, or covenants of the independent sales representative, NPC or others. Merchant acknowledges and agrees that the Merchant Agreement shall not be altered by any prior, contemporaneous or subsequent oral representations made by any party. Merchant further authorizes the release of Merchant information in accordance with the provisions of Section 10 of the Terms and Conditions. If Merchant does not want to participate in the American Express Program, the applicable Opt Out Box has been marked.

IN WITNESS WHEREOF Merchant has caused this Agreement to be executed by its duly authorized representative effective in accordance with the terms of the Terms and Conditions. The Agreement shall be binding upon Merchant upon the earlier of Merchant's execution below or Merchant's first processed electronic transaction.

MERCHANT

Signature	Name	Date
X		

Merchant's Business Name (Legal): _____

SECTION 13 EQUIPMENT SETUP PROVIDER CODE: NPC = NPC to ship equipment SOF = Sales office to ship equipment MER = Merchant Owned

TERMINAL	QTY	PROVIDER CODE	PRINTER	PROVIDER CODE	PIN PAD	PROVIDER CODE
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
Other:		Provider Code:	Other:	Provider Code:	Other:	Provider Code:

EQUIPMENT SOFTWARE INFORMATION	SOFTWARE NAME	PUBLISHER	VERSION
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EQUIPMENT OPTIONS THE DEFAULT SELECTION WILL BE APPLIED FOR ANY OPTION NOT SELECTED BELOW

<input type="checkbox"/> RETAIL / MOTO AVS <input type="checkbox"/> YES <input type="checkbox"/> NO Last 4-Digits <input type="checkbox"/> YES <input type="checkbox"/> NO CVV 2 <input type="checkbox"/> YES <input type="checkbox"/> NO Purchase Card/Level 2 <input type="checkbox"/> YES <input type="checkbox"/> NO Invoice # Prompt <input type="checkbox"/> YES <input type="checkbox"/> NO PBX Code <input type="checkbox"/> 8 <input type="checkbox"/> 9 Multi Merchant <input type="checkbox"/> YES <input type="checkbox"/> NO First Merchant MID _____ Auto-Close++ <input type="checkbox"/> YES <input type="checkbox"/> NO TIME _____ Store N Forward <input type="checkbox"/> YES <input type="checkbox"/> NO Pre-dial <input type="checkbox"/> YES <input type="checkbox"/> NO Cash Back <input type="checkbox"/> YES <input type="checkbox"/> NO Debit Cash Bank Max Amount _____ ++ Auto-Close Time for Alternate Funding needs to be no later than 7:30 p.m. CST	<input type="checkbox"/> RESTAURANT Tips <input type="checkbox"/> YES <input type="checkbox"/> NO Servers <input type="checkbox"/> YES <input type="checkbox"/> NO Tables <input type="checkbox"/> YES <input type="checkbox"/> NO Bar Tab <input type="checkbox"/> YES <input type="checkbox"/> NO Suggested Tip <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> FAST PAY (FPS) <input type="checkbox"/> Both receipts signature line <input type="checkbox"/> Both receipts NO signature line <input type="checkbox"/> NO receipts under \$25.00	<input type="checkbox"/> CASH ADVANCE <input type="checkbox"/> LODGING FUEL <input type="checkbox"/> YES <input type="checkbox"/> NO PASSWORD All <input type="checkbox"/> YES <input type="checkbox"/> NO Void <input type="checkbox"/> YES <input type="checkbox"/> NO Return <input type="checkbox"/> YES <input type="checkbox"/> NO Settlement <input type="checkbox"/> YES <input type="checkbox"/> NO Other _____
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Custom Header / Footer:	Wireless ID:
	Comments:

EQUIPMENT SHIPPING INSTRUCTIONS Required ONLY if ordered through NPC - Default shipping options (indicated by *) will be applied for any option not selected below

Ship To: <input type="checkbox"/> Merchant Location * <input type="checkbox"/> ISO Location <input type="checkbox"/> Other	<input type="checkbox"/> 1-3 Day <input type="checkbox"/> Over Night Priority * <input type="checkbox"/> Ground <input type="checkbox"/> Saturday
Attn:	Payment For Equipment Will Be: <input type="checkbox"/> Lease <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover <input type="checkbox"/> Amex <input type="checkbox"/> 30 Day (Bill Group)
Address:	
City: State: Zip: Phone #:	<input type="checkbox"/> Special Instructions:
NPC TO REPROGRAM/TRAIN MERCHANT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NPC TO SHIP WELCOME KIT? <input type="checkbox"/> YES <input type="checkbox"/> NO	

WELCOME KIT SHIPPING INSTRUCTIONS Required if welcome kit is shipping to separate address from above

Ship To: <input type="checkbox"/> Merchant Location * <input type="checkbox"/> ISO Location <input type="checkbox"/> Other	Attn:	Phone #:
Address:	City:	State: Zip:

SECTION 14 SITE INSPECTION INFORMATION

I represent and warrant that the information set forth in the application is true and accurate to the best of my knowledge. In addition, I hereby certify that (check which applies):

<input type="checkbox"/> I have physically inspected the business premises of the merchant at this address, personally confirmed the identity of the person listed in the Owner/Officer Information Section, and witnessed their signing of the Agreement.	Business/Inventory/Shipments: Does business appear as represented? <input type="checkbox"/> YES <input type="checkbox"/> NO Is business open and operating? <input type="checkbox"/> YES <input type="checkbox"/> NO Is inventory sufficient for business type? <input type="checkbox"/> YES <input type="checkbox"/> NO Are goods and services delivered at the time of sale? <input type="checkbox"/> YES <input type="checkbox"/> NO Goods and services charged to credit card on <input type="checkbox"/> Order <input type="checkbox"/> Shipment Are good and services delivered <input type="checkbox"/> Digitally <input type="checkbox"/> Physically <input type="checkbox"/> Both If goods are shipped, is a Fulfillment House used? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> An NPC approved third party site inspection vendor will supply inspection within 15 days of my signature below or I have informed NPC that a site inspection is needed.	
<input type="checkbox"/> I have not physically inspected the business premises of the Merchant; but have verified the validity of the business using outside sources and confirmed the identity of the person listed under the Owner/Officer Information Section.	
If Fulfillment House is used, please complete the following:	

Fulfillment House Name and Address:	Fulfillment House Contact Information:
Is Fulfillment House PCI DSS Compliant? <input type="checkbox"/> YES <input type="checkbox"/> NO	% of shipments by this vendor
Location Type: <input type="checkbox"/> Retail Store Front <input type="checkbox"/> Office Building <input type="checkbox"/> Residence <input type="checkbox"/> Industrial Building <input type="checkbox"/> Trade Show	

Sales Organization:	Sales Rep Signature:	Application Date:
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