



LionCash+ Merchant Application

**Business/Store Information**

\_\_\_\_\_  
(Business/Store Name)

\_\_\_\_\_  
(Business/Store Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

\_\_\_\_\_  
(Business/Store Phone Number) (Business/Store Fax Number)

\_\_\_\_\_  
(Business Description)

\_\_\_\_\_  
(Business/Store Primary Contact) (Primary Contact E-mail address)

\_\_\_\_\_  
(Business/Store Secondary Contact) (Secondary Contact E-mail Address)

\_\_\_\_\_  
(Business/Store Website)

**Alcohol Sales:**  Yes  No **If yes, alcohol as a percentage of Gross Sales:** \_\_\_\_\_%

**Number of Years in Business:** \_\_\_\_\_ **At Present Location:** \_\_\_\_\_

**Owner/Corporate Information**

\_\_\_\_\_  
(Owner Last Name) (Owner First Name)

\_\_\_\_\_  
(Corporate Name)

\_\_\_\_\_  
(Corporate Address)

\_\_\_\_\_  
(City) (State) (Zip)

\_\_\_\_\_  
(Corporate Phone Number) (Corporate Fax Number)

\_\_\_\_\_  
(Federal Tax ID#) (State Where Business is Incorporated) (Type of Corporate Entity)

\_\_\_\_\_  
(Corporate Primary Contact) (Corporate Primary E-mail Address)

\_\_\_\_\_  
(Corporate Secondary Contact) (Corporate Secondary E-mail Address)

## Reimbursement Information

### AUTHORIZATION FOR DIRECT DEPOSIT/WITHDRAWAL

I authorize The Pennsylvania State University to initiate both deposit and withdrawal entries to my checking and savings account listed below as per LionCash+ contract terms. The authority will remain in effect until I notify The Pennsylvania State University, in writing, to cancel this authorization.

(Name of Financial Institution)

(Branch/Address)

(City)

(State)

(Zip)

(Name on Bank Account)

(Type of Account)

(Account Number)

(Routing Number)

Select Preferred Frequency of Settlement:

Daily

Weekly

Monthly

E-mail Addresses for Receipt of Daily Sales Reports: \_\_\_\_\_

## Authorized Name and Title of Person Signing Agreement

(Printed Name)

(Printed Title)

(Signature)

## Advertising Information

The University reserves the right to use the information provided below in its advertising and promotional materials.

(Business Name)

(Business Address)

(Telephone Number)

(Website Address)

### Check All That Apply

Auto Shop  
(Repair, Body & Collision)

Ethnic/Natural Store

Internet Retailer

Tanning Salon

Bookstore

Florist

Jeweler

Towing/Road Service

Clothing/Apparel Store

Gift/Specialty Shop

Laundry Center

Restaurant (Delivery Available)

Coffee Shop

Grocery

Mailing/Shipping Service

Restaurant (Dine In/Take Out)

Computer/Repair Store

Hair Salon/Barber

Nail Salon

*If no other categories apply:*

Convenience/Pharmacy

Health/Fitness Center

Notetaking Service

Other \_\_\_\_\_

Copy Center

Home/Office Store

Printing Service

Dessert Shop

Hotel/Motel

Sports/Recreation Venue

### For id+ Office Use:

(Business Category)

(Business Type)

(Campus)

(Commission Rate)

(Date Application/Agreement Received)

(Date Entered in Settlement System/Pre-noted)

(Bb Location Assigned)