

## Merchant Agreement & Application Form

### **HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED, (\*) SECTIONS MUST BE COMPLETED**

For The Good Box Co Labs LTD, a company registered in England and Wales, company number 10272838, a Payment Facilitator, regulated by the FCA, registration number 772729 ("GoodBox") to provide payment processing services and remit funds we require details from your organisation as the applicant ("the Merchant") in order to set the Merchant up with a Merchant account. Completion of this form will allow GoodBox to provide the Merchant with the requested services which may include both Card Present and eComm transactions.

By filling out and signing this application the Merchant requests that GoodBox enter into an agreement with the Merchant for payment processing services to acquire the Merchant's Transactions and process them for clearing and settlement purposes, through an acquiring bank as selected by GoodBox.

This application, the general Terms and Conditions and the Merchant Terms and Conditions shall collectively form the Merchant Agreement between the Merchant and the Payment Facilitator, GoodBox, giving permission for GoodBox to provide payment processing services. By signing this application, the Merchant agrees to the terms of the Merchant Agreement.

### Merchant Details

Hover over  for advice

Charity or Company Details		
Company / Charity Registration Number*		
Legal Name of Company / Charity*		
Working / Trading Name (if different to legal name)		
Website*		
Company Incorporation / Registration Date*		
Member of Association / Fundraising Group (if applicable)	Parish Buying	Registration Number
Registered Address*		
Building Name / Number*		
Street*		
City / Town*		
County*		
Postcode*		
Country*		
Please give an overview of your charitable work or business and the purpose for which the Merchant Account will be used*:		
Approximate Annual Turnover of Organisation*		£
Expected Average Value of a Single Donation*		£
Expected Monthly Donations through GoodBox Devices*		£
Donation and Transaction Details		
Descriptor * (18 character limit)		GBX*
The descriptor is displayed on a donor or payee's bank statement, it will be accompanied by the contact details of the merchant. Please give these here:		
Charity Contact Email for Donors*		
Charity Contact Telephone Number for Donors*		



**Please remember to save your form before closing it**

Entity Type and Sector (Please select from the drop down menus)

#### Primary Contact for Organisation\*

Salutation	
First Name	
Surname	
Position at Organisation	
Email	
Contact Telephone Number	

#### Secondary Contact

Salutation	
First Name	
Surname	
Position at Organisation	
Email	
Contact Telephone Number	

#### Trustee or Director Details

We need to identify at least one trustee or director of an organisation to comply with anti-money laundering regulations. In the event the organisation is less than 3 years old please provide the details of two trustees or directors. Please note all information provided will be treated in the strictest confidence and only used for the purposes of processing this application.

**A trustee or director will need to sign at the bottom of this form.**

	Trustee / Director 1	Trustee / Director 2
Please specify this person's role		
Salutation*		
First Name(s)*		
Surname*		
Date of Birth*		
Nationality*		
Private Address (if the named person has moved in the last 3 years please provide the previous address below)		
Building Name / Number*		
Street*		
City / Town*		
County*		
Postcode*		
Country*		
Number of Years and Months at Address*	Years:          Months:	Years:          Months:
Email		
Contact Telephone Number		
Previous Address (if moved in the last 3 years)		
Building Name / Number		
Street		
City / Town		
County		
Postcode		
Country		
Number of Years and Months at Address	Years:          Months:	Years:          Months:



**Beneficial Owners: Please list any stakeholders with more than 25% ownership this could include further trustees, settlor or beneficiaries.**

	Beneficial Owner 1	Beneficial Owner 2
Salutation		
First Name(s)		
Surname		
Private Address		
Building Name / Number		
Street		
City / Town		
County		
Postcode		
Country		

#### Settlement Information / Bank account information

GoodBox will settle amounts due to the Merchant to the account as set out below. **Please provide a signed copy of a scanned bank statement less than 3 months old to verify this account or a scanned and signed letter from the bank** quoting the account holder name, address, sort code & account number (signed by a either a legal representative of the Merchant's organisation e.g. Trustee or Director or authenticated by the Merchant's bank). **You may redact sensitive transaction information.** Please note the account name and address must match that of your organisation. A bank statement screenshot will not be accepted. **The MAF and the bank statement need to be signed by the same trustee or director.**

#### Owner details

The Account Holder's Name\*

Bank Name\*

Street Address\*

City\*

Postcode\*

Country\*

#### Account Details

Account Number\*

Sort Code\*

SWIFT

IBAN

#### GoodBox Fees

By signing this Agreement, you are accepting the fees laid out below:

1.	Donation Fee	1.5%
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**Please remember to save your form before closing it**

## Merchant's Consent

By signing this application, the Merchant confirms that it understands and accepts that in order to evaluate its application GoodBox will perform several checks, including politically exposed person (PEP)/ sanction screening and an electronic credit check and in order to fulfil its legal obligation under anti-money laundering regulations. For this purpose, GoodBox will use the service of Onfido or a similar third-party service provider (the "service provider"). By signing this application, the Merchant authorises GoodBox to undertake searches with the service provider for the purpose of both verifying the Merchant's identity and that of its beneficial owners, during the application review and at any time during the term of the business relationship. The Merchant confirms on behalf of itself and its beneficial owners and directors that it is aware that a record of the searches and results thereof may be retained by GoodBox. The Merchant also acknowledges that should further documentation be required to support verification checks, GoodBox may request via a secure system for ID documentation such as a Passport or Driving Licence copy.

The Merchant confirms that they accept the pricing and membership rates as defined in the Order Form and acknowledges that in the event of any Chargebacks these will be charged at a fee of £10 per Chargeback.

In terms of applicable data protection laws and regulations, GoodBox will process the above data and any other data which Merchant may subsequently give to GoodBox or which has been obtained by GoodBox independently for this application, for the following purposes, namely:

- To be able to process this application and provide its services;
  - For due diligence procedures, internal assessment, risk assessment and analysis;
  - For the detection and prevention of fraud and other criminal activity which GoodBox is bound to report;
  - To comply with any laws, rules, or regulations imposed on GoodBox by any relevant authority, regulator or acquiring bank;
- I consent to the processing of such data for the purpose specified on this application and consent to the disclosure of information given above to, and to the exchange thereof with the acquiring bank when required. I understand that I have a right of access to, and the right to rectify, the personal data.

I represent that:

- all the information I have given on this application form is true, complete and accurate and properly reflects the Merchant's business;
- persons whose personal data is disclosed in this application have provided their explicit consent to such use and processing;
- I am duly authorised to bind the Merchant to the terms of the Merchant Agreement.

GoodBox reserves the right to request more information/documentation during onboarding or during the term of the business relationship.

Signed for and on behalf of the Merchant\*:

X

Type signature



Print Name and Title:

Date:



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