



## PayCenter Information

**Complete and fax to: 770-692-2237**

### Company Information

Name	
Street Address	
City	
State/Prov	
Zip/Post Code	
Country	
Email Address 1	
Email Address 2	
Phone Number	
Contact Name	

### Facility Information

Facility Name	
Street Address	
City	
State/Prov	
Zip/Post Code	
Country	
Phone Number	
Fax Number	
Email Address 1	
Email Address 2	
Manager Name	

### Merchant Setup

Processor: *select ONE of the following processors and complete the information for that processor*

<input type="checkbox"/> PPI PayMover	<input type="checkbox"/> Ibiz Vital	<input type="checkbox"/> eWAY
<i>No information is needed – PPI will send your information directly to Hi-TECH.</i>	Merchant Bank ID	Merchant ID
	Category Code	Password
	Country Code	
	Currency Code	
	Language	
	Name	
	Number	
	Service Number	
	State	
	Zip/Post Code	
	Store Number	
	Terminal Number	
	Time Zone	
	Agent Bank Number	
Agent Chain Number		
Terminal ID		
Location Number		

### Payment Support

Visa     Amex     MasterCard     Discover

### Send Notifications to

Email1     Email2     Corporate Email1