

# Merchant ID Request Form

Instructions: This form is required to obtain Merchant ID number after you complete a Merchant Establishment form to establish authorization to process payment cards as a merchant. Please complete, sign, and submit this form electronically with any attachments to the Office of Finance: [PCI@odu.edu](mailto:PCI@odu.edu)

Department:

Today's Date:

Requester:

Desired Go Live Date:

## Merchant Description

Merchant Account Name (22 characters max.):

Full Description:

## Type of Processing

What method does your department desire to use to process payment cards?

Check all that apply:

Online Website URL of launch page:  
Payment How many terminals will your department be purchasing?  
Card Terminal **Terminal costs and monthly fees are the responsibility of the requesting department. Payment card terminals must be ordered through the Office of Finance.**

Campus location of terminal(s):

Bldg/Room #:

How will payment cards be accepted?

Check all that apply:

Payment Card Terminal	By Fax	In person
Online via Other Provider -	By Mail	By phone

Provider Name:

Online via TouchNet/uStore Site

Person responsible for maintaining uStore:

**Note: A uStore site allows a site manager to create stores and product pages with a shopping cart checkout feature, all on a secure platform. \*\*\*uStores must employ the CAPTCHA setting within all products for added security. Ensure the CAPTCHA setting is set to "Yes" on all products in your store.**

Online via TouchNet/uPay Site

**Note: The uPay site is built to connect with an existing web application that allows the payment information and transaction to take place on a secure platform.**

If using TouchNet, you must include a completed User Request Form found at:

[https://wmtwmtT EMC\\_qn8372.38EMC\\_O7e Rt 2uTw \( Mrf.3c\)-4. Rd awmwml0 19.9:](https://wmtwmtT EMC_qn8372.38EMC_O7e Rt 2uTw ( Mrf.3c)-4. Rd awmwml0 19.9:)

Are you selling taxable products?    YES    NO

\*\*\*Old Dominion University is exempt from paying Virginia Sales Tax o

Name

Job Title

UIN

Student Worker?

YES

YES

YES

YES

YES