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**ATM Processing & Site Location Pre-Application**

Merchant Managed
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**Section A Terminal Deployment Location [Requires completion]**

Full Name	E-mail address
Name of Location (Doing Business As)	Physical Street Address of Location
City, State, Zip of Location	Location Phone Number
Business Tax ID Number of Merchant	Type of Business (Sole Proprietor, Partnership, LLC, Corporation, Financial Institution)
Merchandise/Services Sold where terminal is deployed	Financial Institution Number (FI#, FDIC, NCUA, ASI)

Please prepare the following

- Voided check
- Photo copy of valid ID

