

SECURECHECK™ SERVICE APPLICATION

APPLICATION INSTRUCTIONS

1. Complete the SecureCheck Application below. All information is required unless stated "optional."
2. Initial the pages labeled "SecureCheck.Net Standard Terms" in the upper right hand corner, indicating that you have read and agree with the terms.
3. Attach a voided check, preprinted with company name and address for the bank account supplied below.
4. **If Merchant is a Corporation, LLC, or Professional Corporation for OVER TWO YEARS, also include:**
 - a. copy of Articles of Incorporation or Articles of Organization (and if non-profit, IRS proof of non-profit status)
 - b. last two years of financial statements (signed profit/loss and balance sheets OR signed tax returns)
 - c. current, signed year-to-date profit/loss and balance sheet
5. **If Merchant is a Corporation, LLC, or Professional Corporation for LESS THAN TWO YEARS, also include:**
 - a. copy of Articles of Incorporation or Articles of Organization
- (and if non-profit, IRS proof of non-profit status)
- b. available financial statements (signed profit/loss and balance sheets **OR** signed tax returns)
- c. current, signed year-to-date profit/loss and balance sheet
- d. name and signature of Personal Guarantor
- e. copy of Personal Guarantor's Driver's License
6. **If Merchant is a Sole Proprietor or Partnership, also include:**
 - a. name and signature of Personal Guarantor
 - b. copy of Personal Guarantor's Driver's License
7. If applicable (see Fee Schedule), enclose a check in the amount of the SecureCheck Application Fee made payable to SecureNet LLC
8. Print out and fax **OR** mail the completed and signed Application and all other required documents (including initialed pages of the SecureNet Standard Terms) to: (fax) 301-231-0807 or (mail) SecureNet, 6011 Executive Blvd, Suite 201, Rockville, MD 20852, Attn: Application Department.

FAILURE TO FOLLOW THE INSTRUCTIONS LISTED ABOVE MAY DELAY THE PROCESSING OF YOUR APPLICATION

Subject to the acceptance process described in this Application, this SecureCheck Service Agreement, comprised of this Application, the SecureCheck Standard Terms and all incorporated policies and procedures (collectively, the "Agreement"), is made and entered into by and between SecureNet LLC, a Maryland Corporation whose principal place of business is 6011 Executive Blvd. Rockville, MD 20852 ("SecureNet"), and the company listed below in the SecureNet Application ("Merchant"). SecureNet is a wholly owned subsidiary of SecureNet Holdings LLC, a Maryland corporation whose principal place of business is in Rockville, MD.

Please Print And Fill Out Completely (Incomplete Applications Will Not Be Processed or Activated)				
Company Name	Doing Business As			Date
Location Address	City/State/ZIP Code	Company Website Address (URL)		
Billing Address	City/State/ZIP Code	D-U-N-S Number (Optional)		
Type of Business and Description of Products Sold			Contact Name & Email Address	
Federal Tax ID #	Company Telephone	Company Facsimile	Mobile Telephone	Years in Business

Corporate Officer or Principal No. 1				
Name	Social Security #	Email Address	Title	
Corporate Officer or Principal No. 2				
Name	Social Security #	Email Address	Title	
Business Trade References (Please provide both)				
Company Name	Account Number	Contact Name	Address/City/State/ZIP	Telephone
Company Name	Account Number	Contact Name	Address/City/State/ZIP	Telephone
Bank ACH Information (Mandatory for billing purposes and funds transfers)				
Banking Institution Name	Local Branch Address/City/State/ZIP Code			
Account Owner Type (select one): Personal or Corporate	Telephone	Bank Routing Number (9 digits)	Account Number	
Name on Account	Type of Account (select one): Checking or Savings			
Credit Card Information (Optional: for backup billing purposes only)				
Name as it Appears on Card	Credit Card Number	Expiration Date		
Account Information and Requested Limits*				
SecureNet Login ID:	Maximum Dollar Amount per SecureCheck Transaction:	Please provide a 10-character abbreviation of your company name. This will appear on your customers' bank statements for each SecureCheck Transaction. _____		
Maximum Dollar Amount per Month for SecureCheck Processing:				

SECURECHECK™ SERVICE APPLICATION (CONTINUED)

Has Merchant ever been cited for violating a National Automated Clearing House Association ("NACHA") rule or regulation? _____ **If yes, please explain on a separate sheet.**

Does Merchant have any outstanding judgments or liens against it? _____ **If yes, please explain on a separate sheet.**

Has Merchant ever previously held a SecureCheck account with SecureNet? _____ If yes, Login ID(s) _____

Does Merchant currently have another active SecureCheck account with SecureNet? _____ If yes, Login ID(s) _____

Does Merchant have a fraud detection system in place to authenticate the identity of its customers? _____ **If yes, please explain on a separate sheet.**

Application and Acceptance. By signing and submitting this Application, Merchant is only requesting to receive SecureNet's electronic check processing and payment gateway service as described at <http://www.securenet.com>. The Agreement shall be effective as of the date SecureNet accepts Merchant's Application (the "Effective Date"). If SecureNet accepts Merchant's Application, SecureNet shall send an e-mail or other written notification to Merchant. Only receipt by Merchant of written notification (usually via e-mail) of SecureNet's acceptance of Merchant's SecureCheck Application will be effective to bind the parties to the terms and conditions of the Agreement along with any Account Restrictions noted in SecureNet's acceptance. SecureNet reserves the right to accept or reject any Application for any reason in its sole discretion. The SecureCheck Application Fee constitutes payment for processing Merchant's Application and is non-refundable.

Additional Restrictions. SecureNet reserves the right to accept Merchant's SecureCheck Application subject to additional restrictions, including, but not limited to: (a) SecureCheck per transaction and monthly ACH processing restrictions, and (b) the amount, if any, required to be deposited in a reserve account prior to activation of Merchant's SecureCheck ACH processing account (collectively, the "Account Restrictions"). If such Account Restrictions are unacceptable, Merchant's sole recourse shall be to immediately terminate the Agreement by providing written notice within five (5) business days of receipt of SecureNet's notice of acceptance.

In witness whereof, Merchant has read and agreed to all the terms and conditions of this Agreement (including the Application, the Standard Terms, and all referenced policies and procedures) and hereby agrees thereto by the signatures of its duly authorized representative.

<p>MERCHANT: Print Company Name</p> <p>Type of entity: _____ (e.g., sole proprietorship, partnership, corporation)</p> <p>By: _____ (PRINCIPAL OR CORPORATE OFFICER)</p> <p>Print Name: _____</p> <p>Title: _____</p> <p>Date: _____</p>	<p>PERSONAL GUARANTOR</p> <p>By: _____ *PERSONAL GUARANTOR (AN INDIVIDUAL) if required. By signing as the Personal Guarantor, you authorize SecureNet to obtain your current personal credit history.</p> <p>Print Name: _____ *Personal Guarantor must also attach legible copy of Driver's License.</p> <p>Date: _____</p>
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*If Merchant is required by SecureNet to have a Personal Guarantor sign this Agreement, the Personal Guarantor must provide the following additional information:

Name	Social Security Number	Date of Birth	Home Telephone
Residential Address	City/State/Zip Code	How long?	Email Address

Are there any unresolved misdemeanors pending against you? _____ **If yes, please explain on a separate sheet.**

Have you ever been convicted of a felony? _____ **If yes, please explain on a separate sheet.**

Have you ever declared bankruptcy? _____ If yes, when and in what state(s)? _____

Do you have any outstanding judgments or liens pending against you? _____ **If yes, please explain on a separate sheet.**