



# CHANGE REQUEST FORM

Email to: [sales@valuedmerchants.com](mailto:sales@valuedmerchants.com)  
OR Fax to: 877-885-1740 Tel: 800-531-8575

Terminal ID: \_\_\_\_\_

Change Effective Date: \_\_\_\_\_

## CURRENT LOCATION

Location Name	Street Address	City	ST	ZIP
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### Location / Equipment Change

NEW Location Name	Location Contact	Location Tel.
Street Address	City	ST ZIP
<input type="checkbox"/> Allow Merchant Level Access to Internet Reports      Merchant email : _____		
ATM Manufacturer	Model	ATM Serial # (for warranty tracking)

### Surcharge / Income Distribution Change

- ◆ W-9 Required for all New Payees
- ◆ Operator Agreement for New Vaulters
- ◆ For ACH Payments, provide ACH Form

NEW Surcharge Amount: \$ \_\_\_\_\_

OLD Surcharge Amount: \$ \_\_\_\_\_

New Income Distribution	Role	Amount	Income Distribution Method	Office Use
1st Payee name	<input type="checkbox"/> ATM Owner <input type="checkbox"/> Vaulter <input type="checkbox"/> Location <input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> Monthly Check <input type="checkbox"/> Daily Deposit <input type="checkbox"/> Monthly ACH <input type="checkbox"/> No Change	Partner-# P
2nd Payee name	<input type="checkbox"/> ATM Owner <input type="checkbox"/> Vaulter <input type="checkbox"/> Location <input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> Monthly Check <input type="checkbox"/> No Change <input type="checkbox"/> Monthly ACH Deposit	P
3rd Payee name	<input type="checkbox"/> ATM Owner <input type="checkbox"/> Vaulter <input type="checkbox"/> Location <input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> Monthly Check <input type="checkbox"/> No Change <input type="checkbox"/> Monthly ACH Deposit	P
Total Surcharge Payout		\$ _____		

Additional Monthly Location Fees:      Statement Fee \$ \_\_\_\_\_      Network Fee \$ \_\_\_\_\_      EBT Fee \$ \_\_\_\_\_

### Bank Account Change - Same Owner of Prior Bank Account

### NEW VAULTER - Submit for NEW TID. For questions contact your account manager

\*\*\* ACH FORM MUST BE ATTACHED FOR BANK ACCOUNT CHANGES \*\*\*

OLD Bank Name: \_\_\_\_\_ OLD Account Number: \_\_\_\_\_

Additional instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**X** \_\_\_\_\_  
Affiliate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Partner Number



# ACH AUTHORIZATION FORM

Email to: sales@valuedmerchants.com OR  
Fax to: 877-885-1740 Tel: 800-531-8575

Check Here To Change Bank Account  
For Existing TID # \_\_\_\_\_

Vault Cash/Replenishment Acct       Surcharge/Income Acct       Both (Vault cash and Income)

Business Name			Contact
Business Address			email
City	ST	Zip	Telephone

## ACCOUNT INFORMATION

Bank Name:	Account Name on Check:	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Routing Number:	Account Number:		

I, the undersigned, (hereinafter "ATM Operator") authorize NationalLink, Inc., (hereinafter "NationalLink") or its designated assignee(s), to initiate ACH transfer entries and to credit and/or debit the account identified herein. This authorization shall remain in effect unless and until NationalLink has received clear written notification from ATM Operator that this authorization has been terminated. NationalLink thus has the right, title and interest in and to credit and debit Account for the settlement of terminal transaction and transaction adjustments on behalf of ATM Operator. All shortages and adjustments must be reported to NationalLink within seven (7) days or ATM Operator assumes full liability thereof. ATM Operator further agrees to comply with all electronic-fund-transfer network rules and regulations.

It is the responsibility of ATM Operator to verify that all information contained in the exhibits and all other forms submitted to NationalLink, or any modification thereof, are correct and complete. NationalLink has no responsibility to verify any such information and will not be responsible for any claims whatsoever related to any incorrect information submitted to NationalLink. ATM Operator shall notify NationalLink of any disputed item or items. NationalLink shall not be liable for any amounts which were transmitted in error over thirty (30) days prior to the date NationalLink receives notice from ATM Operator, regardless of fault. ATM Operator further agrees to fully indemnify NationalLink from any and all claims related to the transfers contemplated herein.

\_\_\_\_\_  
Print Name

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ATTACH HERE**  
**Pre-Printed VOIDED CHECK**

This authorization will not be activated without check or Bank letter

**ATTACH A COPY OF ATM OPERATOR'S DRIVER LICENSE  
ON A SEPARATE SHEET**

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** The IRS has created a page on IRS.gov for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.