

# ATM Operator Agreement and/or ATM Source of Funds Provider

## Declaration Agreement

**Select One:**      **Applicant is an Individual or a Sole Proprietor (complete Section C)**  
                          **Applicant is a Company (complete Section D using information from the Articles of Incorporation)**

**Then check appropriate applicant role(s):**

- ATM Operator or**
- ATM Source of Funds Provider or**
- Both ATM Operator and ATM Source of Funds Provider**

**PATRIOT ACT DISCLOSURE:** IMPORTANT INFORMATION ABOUT PROCEDURES FOR BECOMING A CUSTOMER – To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each individual or entity who becomes a customer. When you become a customer, we will ask for your name, address, date of birth, and other information that will allow us and our sponsor bank, Pathward, National Association (“Bank”), to identify you. We may also ask to see your driver’s license or other identifying documents.

Section A Terminal Deployment Location [Requires completion]		
1. Name of Location (Doing Business As)	2. Physical Street Address of Location	
3. City, State, Zip of Location	4. Location Phone Number	
5. Business Tax ID Number of Merchant	6. Type of Business (Sole Proprietor, Partnership, LLC, Corporation, Financial Institution)	
7. Merchandise/Services Sold where terminal is deployed	8. Financial Institution Number (FI#, FDIC, NCUA, ASI)	
Section B Deployed Terminal Information [Requires completion]		
9. Terminal Identification Number	10. Processor of deployed terminal	
Section C Applicant is an Individual or a Sole Proprietor		
11. Applicant First Name	12. Applicant Last Name	
13. Applicant (Home) Physical Street Address	14. Applicant (Home) City, State, Zip	
15. Applicant Social Security Number	16. Applicant Date of Birth (mm/dd/yyyy)	17. Applicant Home or Mobile Phone Number
Section D Applicant is a Company (Partnership, LLC, Corporation, Financial Institution)		
18. Company Legal Name as stated on Articles of Incorporation	19. Company Address as stated on Articles of Incorporation	
20. Company City, State, Zip as stated on Articles of Incorporation	21. Company Federal Employer Identification Number (FEIN)	
Section E Application Declaration, Agreement between ATM Operator/ATM Source of Funds Provider and ISO		
22. The undersigned Applicant (“the named ATM Operator/ATM Source of Funds Provider”) provides consent to the undersigned ISO (“ISO”) for all the following and affirms that all information contained in this Application for Sponsorship, and any other documentation supplied thereto, is true and correct.		
<ul style="list-style-type: none"> <li>- Applicant understands that Pathward, National Association (“Bank”) sponsors the ATM Terminal and financial transactions on the ATM Terminal that the Applicant will financially participate in.</li> <li>- The Applicant is applying for an account relationship with Bank, as an ATM Operator and/or ATM Source of Funds Provider sponsored by the Bank.</li> <li>- The Applicant acknowledges in order to fight the funding of terrorism and money laundering activities, Bank is required to verify the identity of each person who opens an account with Bank.</li> <li>- The Applicant agrees that the Bank is authorized to obtain Consumer and (if applicable) Business Credit Reports and to undertake a criminal Background Investigation in connection with this Application.</li> <li>- Applicant authorizes Bank or any of its agents to investigate information or data obtained from this application.</li> <li>- If the Applicant is a company, Applicant hereby provided authorization for such Company.</li> <li>- Applicant agrees to provide any further information, including financial data, as may be reasonably requested by Bank.</li> <li>- Applicant may, upon written request, obtain a complete and accurate disclosure of the nature and scope of the investigation requested hereunder.</li> <li>- Applicant acknowledges that Bank may accept or deny this Application in its reasonable discretion.</li> <li>- Applicant agrees to comply at all times with applicable laws and regulations as well as banking, regulatory, and network rules, including but not limited to the Plus Systems, Inc., MasterCard/Cirrus, etc. Bylaws and Operating Regulations, which Bylaws and Operating Regulations may be amended from time to time.</li> <li>- Applicant understands the Bank may terminate this relationship in Bank’s sole discretion or in the event that the Applicant or ISO fail to comply with the Bylaws and Operating Regulations and/or governing regulations.</li> <li>- Applicant agrees that they will indemnify and hold harmless the Bank, the processor, the Networks you participate in (including but not limited to Plus System, Inc., MasterCard/Cirrus, etc.) and Network Members, from and against any and all claims, losses, or damages arising out of Applicant’s or ISO’s failure to comply with this Agreement, with applicable laws and regulations, and with the Bylaws and Operating Regulations and/or governing regulations</li> <li>- Applicant agrees that the surcharge amount assessed at a sponsored Terminal shall be fair and reasonable and in accordance with Operating Regulations, Bylaws, and/or governing regulation</li> <li>- Applicant is not a cannabis related business and is not affiliated with a cannabis related business.</li> </ul>		
<b>Signature of ATM Operator/ATM Source of Funds Provider</b>	<b>Signature of ATM ISO</b>	
Signature	Signature	
Name	Name	
Title/Date	Title/Date	