#  Application Form

1. **Basic Information**

|  |  |
| --- | --- |
| **Company Legal Name：** | **DBA Name:**  |
| **Registered Address：** |
| **Business Address：** |
| **Company EIN(Employer Identification Number) Number only for US merchant：** |
| **License Number (if applicable)：** |
| **Date of Incorporated:** | **Country of Incorporation:** |
| **Company's Phone Number:** | **Company's Email:** |
| **Business Website：** |
| **List the Number of Related Staff:** |
| **Customer Service:** | **Finance:** |
| **Risk Management:** | **Technology:** |
| **2.   Major Core Staff** |  |
| ***Legal Person/Principal Name:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of shares** | **Title in Company:** |
| **Residential Address:** |
| ***Director Name:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of shares:** | **Title in Company:** |
| **Residential Address:** |
| ***Chief Financial Officer:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of shares** | **Title in Company:** |
| **Residential Address:** |
| ***Chief Risk Officer:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of shares:** | **Title in Company:** |
| **Residential Address:** |
|  |  |
| **3. Ultimate Beneficial Owner (List all individuals with 25% or more ownership)：**

|  |  |
| --- | --- |
| ***\*Owner Name:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of ownership:** | **Title in Company:** |
| **Residential Address:** |
| ***\* Owner Name:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of ownership:** | **Title in Company:** |
| **Residential Address:** |
| ***\* Owner Name:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of ownership:** | **Title in Company:** |
| **Residential Address:** |
| ***\* Owner Name:*** | **Passport Number:** |
| **Issue Country:** | **SSN/ITIN only for US merchant:** |
| **Email：** |
| **Phone Number:** | **Date of Birth:** |
| **Percentage of ownership:** | **Title in Company:** |
| **Residential Address:** |

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| **4.    Business Profile** |
|  **Length of Time in Business: Year(s)** |
|  **Products/Service Description：** |
|  **Estimated Monthly Sales Volume（USD）：** |
|  **Main Customer Base：Europe□ United States□ Japan□ Southeast Asia□ Others□**  |
| **（Please identify countries when necessary: ）**  |
|  **Transaction Currency：USD□**  |
|  **Average Order Size： /( USD )：** |
|  **Promotion Channels：** |
|  **Handling Days when Order Placed： Days** |  **Delivery Days (Handling+Shipping)： Days** |
|  **Return Time： Days** |  **Exchange Time： Days** |
|  **Logistics Partners：** **Fedex□ UPS□ DHL□ others□** |
|  **Customer Service Channels：Email□ Live Chat□ telephone□**  |
| **5. Processing History** |
| **Credit Card Processing History (calculate per count)：** |
| **Timeframe** | **Chargeback Rate** | **Refund Rate**  |
| **Last 3 Months** |  |  |
| **Last 6 Months** |  |  |
| **Last 12 Months** |  |  |
| **6. Settlement Info** |
| **Bank Account Holder:** | **Bank Account Number：** |
| **Bank Name:** | **Routing Number:** |
| **Bank Address:** |

***※The applicant should be fully aware that the next stage of the audit will be terminated immediately if any concealment be verified according to the information provided above.***

*I, \_\_\_\_\_\_\_\_\_\_\_\_\_ (name of person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct.*

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_