

APPLICATION FORM

1. BUSINESS DETAILS FOR CORPORATE CUSTOMER (For non-corporate customer, please fill in Part 2)

Registered Name: <small>(Must be the same as crediting bank account name)</small>	Business Registration Number:	Relationship with NETS: <input type="checkbox"/> New <input type="checkbox"/> Existing
Trading Name: <small>(Max 25 characters including spaces)</small> <input type="text"/>	Business Activity: <small>(Please describe your business activity)</small>	Date of Incorporation: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Business Entity Type: <input type="checkbox"/> Private Limited <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Limited Liability Partnership (LLP)	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Government Agency <input type="checkbox"/> Partnership	<input type="checkbox"/> Public Company <input type="checkbox"/> Non-Profit <input type="checkbox"/> Club & Society
<input type="checkbox"/> Exempt Private Co. <input type="checkbox"/> Foreign Company	Country of Incorporation: <input type="checkbox"/> Singapore <input type="checkbox"/> Others: _____	

1.1 Account Crediting Information

Bank Name: <input type="checkbox"/> DBS / POSB <input type="checkbox"/> UOB <input type="checkbox"/> OCBC <input type="checkbox"/> Other Bank*: _____ <small>Only applicable to e-commerce merchants (eNETS)</small>	Account Name: <input type="checkbox"/> Same as Registered Name in Part 1
	Branch Code: _____ Account Number: _____

1.2 Billing Information

Contact Person:	Office:	Mobile:
Mailing Address:	Email address:	
Postal Code:	<small>Authorised to receive communication from NETS and to communicate customer information to NETS for all accounts under the same company. NETS will send written communication to the address provided in the billing information.</small>	

1.3 MerchantConnect Portal

Email address: <input type="checkbox"/> Same as above	Mobile: <input type="checkbox"/> Same as above
<small>Authorised to receive welcome email to access MerchantConnect Portal.</small>	<small>Receive a One-Time-Password sent via SMS to this mobile number.</small>

What is MerchantConnect?
An online portal for NETS merchants to view daily transactions, settlements, reports, invoices and more. Website: <https://merchantconnect.nets.com.sg>

All information is required unless stated.

2. ONLY FOR NON CORPORATE CUSTOMER (Please continue with 1.1)

Name (as per ID):	NRIC/ID Number:	Date of Birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Trading Name: <small>(Max 25 characters including spaces)</small> <input type="text"/>	Business Activity: <small>(Please describe your business activity)</small>	License Number:
Nationality: <input type="checkbox"/> Singaporean <input type="checkbox"/> Others: _____	Country of Birth: <input type="checkbox"/> Singapore <input type="checkbox"/> Others: _____	Country of ID Issuance: <input type="checkbox"/> Singapore <input type="checkbox"/> Others: _____

I / We confirm that I/we have read and understood and that I/we agree that I/we am/are bound by the Terms and Conditions For Merchant ('Merchant T&Cs') (a copy of which is available on www.nets.com.sg, and which we have extracted and read, and all such amendments thereto NETS may stipulate from time to time), any terms and conditions in this Application Form, the Price Guide, and all such amendments thereto as NETS may stipulate from time to time, by completing and submitting this application, and its acceptance by NETS.

For avoidance of doubt, we recognise and agree that our signature will not appear on the Merchant T&Cs or the Price Guide or on every page of the Merchant Application, but that we are nevertheless bound by all those to the extent that I/we have completed and submitted this application and it is accepted by NETS.

In the event that I/we have currently signed up for some or all of the in this application form, then I/we agree that I/we shall be bound by the Merchant T&Cs, any terms and conditions in this Application Form and the Price Guide and all such amendments thereto as NETS may stipulate from time to time, with respect to all services currently being provided by NETS and all services that have been selected in this form will be provided by NETS in the future.

I/We hereby consent to the disclosure of all information pertaining to my/our accounts maintained with my/our Bank (stated in this application) by my/our Bank to NETS. We hereby apply to participate in the selected service(s) applied for in this Application Form. We understand and agree that we can apply for such services as are listed from time to time as we choose to, but that at all times we will nevertheless be bound by all relevant terms and conditions.

By submitting this form and signing hereunder, I confirm that the personal data submitted is true and accurate and that I consent to the collection, use, disclosure and sharing of this data by NETS for purposes reasonably required to process my application as set out in NETS' Data Protection Policy <https://www.nets.com.sg/policy/data-protection/>

Full T&Cs can be found at www.nets.com.sg

Name: Designation: NRIC: Date: Signature:	Name: Designation: NRIC: Date: Signature:	Name: Designation: NRIC: Date: Signature:
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FOR BANK VERIFICATION

Name: Designation: Date: Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/other particulars agree with that contained in our files.	Bank Stamp:	Signature:
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TERMINAL / QR IMPLEMENTATION FORM

Program Implementation Form (PIF) - A



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3. APPLICATION FOR NETS TERMINAL(S) (Fill in by Applicant)

Number of Terminal(s) required:	Type of Terminal:	<input type="checkbox"/> Wired via Phone Line	<input type="checkbox"/> Wired via LAN	<input type="checkbox"/> Wireless	<input type="checkbox"/> Others: _____
		<input type="checkbox"/> Self-Service Kiosk	<input type="checkbox"/> Non Mobile	<input type="checkbox"/> Vending and Unattended	

3.1 Terminal Installation Details

Outlet Address:		
Contact Person:	Office Number:	Mobile Number:

Select the Mode of Installation

<input type="checkbox"/> Self Collect at NETS Office (\$10 admin fee per terminal) Collection Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Address: 298 Tiong Bahru Road #06-01/06 Central Plaza Singapore 168730 Operating Hours: 9.00am – 5.30pm (Mon – Fri)	<input type="checkbox"/> Install by NETS (\$50 per location plus \$10 admin fee per terminal) Installation Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Installation Address (If different from outlet address): Installation Time: <input type="checkbox"/> 9am - 12pm <input type="checkbox"/> 12pm - 3pm <input type="checkbox"/> 3pm - 6pm
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Select the Mode of Retrieval (For Temporary Terminal Only)

<input type="checkbox"/> Self Return at NETS Office (\$10 admin fee per terminal) Self Return Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Address: 298 Tiong Bahru Road #06-01/06 Central Plaza Singapore 168730 Operating Hours: 9.00am – 5.30pm (Mon – Fri)	<input type="checkbox"/> Retrieve by NETS (\$50 per location plus \$10 admin fee per terminal) Retrieval Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Retrieve Address (If different from outlet address): Retrieval Time: <input type="checkbox"/> 9am - 12pm <input type="checkbox"/> 12pm - 3pm <input type="checkbox"/> 3pm - 6pm
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Select Billing Arrangement (For Temporary Terminal Only)

<input type="checkbox"/> \$10 per day + Transaction Fee	<input type="checkbox"/> \$120 per month + Transaction Fee
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3.2 Application for NETS Terminal(s) with Credit Card Acceptance

Select the Payment Scheme(s): <input type="checkbox"/> VISA / MASTER <input type="checkbox"/> JCB <input type="checkbox"/> AMEX <input type="checkbox"/> UnionPay International Please refer to the price guide for the transaction fees.	Payment for collaterals: Amount: _____ (No cash payment) <input type="checkbox"/> Bank Transfer to DBS Account: 001 - 024 - 6500 <input type="checkbox"/> Cheque Payable to NETS
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How to determine the amount for the collateral payment?

The amount is based on the following calculation: Estimated monthly credit card sales volume x 6 months x 15%
If estimation amount falls below actual sales, merchant have to top up the balance for the collateral payment.

3.3 Application for NETS Terminal(s) with Foreign Cards and Payment Acceptance

Select the Payment Scheme(s): <input type="checkbox"/> China - WeChat <input type="checkbox"/> Malaysia - MyDebit <input type="checkbox"/> Indonesia - BCA <input type="checkbox"/> India - RuPay and BHIM Please refer to the price guide for the transaction fees.

3.4 Value Added Service

<input type="checkbox"/> Digital Receipt (Applicable to selected terminal models only) Please refer to the price guide for the subscription fees.
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3.5 Terminal Configuration - Receipt Header

Company Name: <input type="text"/>	(Max 20 characters)
Location: <input type="text"/>	(Max 13 characters)
Receipt Sub-header: <input type="text"/>	(Max 20 characters)

4. APPLICATION FOR SGQR Note: Trading name indicated in Part 1 will be displayed on SGQR label.

<input type="checkbox"/> Create new SGQR Label(s)	Number of SGQR Label(s) required:	SGQR ID (For existing SGQR merchant):
<input type="checkbox"/> Update existing SGQR Label(s)	<small>Note: By default, each SGQR ID is tag to unique terminal ID. If you require multiple SGQR labels for one terminal, please indicate in the box.</small>	<small>Note: The 12 characters SGQR ID can be found at the top right corner of your existing label.</small>

5. APPLICATION FOR simplyNETS

<input type="checkbox"/> Static QR only	<input type="checkbox"/> Static QR and Terminal
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FOR INTERNAL USE

Account Type: <input type="checkbox"/> UAT <input type="checkbox"/> Production		Merchant Information:	
		Cust Code / Billing Acct No:	SSIC Code:
			MCC Code:

Terminal Configuration :		Unified POS:	
Dial Fallback:	<input type="checkbox"/> Enable <input type="checkbox"/> Disable	Terminal Setup:	<input type="checkbox"/> Master Acquiring <input type="checkbox"/> TR - NPX <input type="checkbox"/> TR - NIT
PABX:	<input type="checkbox"/> : ___ <input type="checkbox"/> NA	VISA / MASTER	<input type="checkbox"/> DBS <input type="checkbox"/> UOB <input type="checkbox"/> OCBC
Screen Saver:	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> First Data
Financial Transaction:	<input type="checkbox"/> <input type="checkbox"/>	JCB	<input type="checkbox"/> MM <input type="checkbox"/> Bank
Duplicate Receipt:	<input type="checkbox"/> <input type="checkbox"/>	AMEX	<input type="checkbox"/> MM <input type="checkbox"/> Bank
Tips Adjustment:	<input type="checkbox"/> <input type="checkbox"/>	UPI	<input type="checkbox"/> MM <input type="checkbox"/> Bank
T-Settlement:	<input type="checkbox"/> <input type="checkbox"/>		
ECR Transaction Receipt:	<input type="checkbox"/> <input type="checkbox"/>		
ECR Logon Receipt:	<input type="checkbox"/> <input type="checkbox"/>		
ECR Settlement Receipt:	<input type="checkbox"/> <input type="checkbox"/>		
ECR Port:	<input type="checkbox"/> Serial (RS232) <input type="checkbox"/> LAN		
ECR Mode :	<input type="checkbox"/> Ver 1 <input type="checkbox"/> Ver 2 <input type="checkbox"/> Ver 3		
Comm Type:			
<input type="checkbox"/> LAN - Static <input type="checkbox"/> LAN - Dynamic <input type="checkbox"/> Dialup <input type="checkbox"/> GPRS			
IP Address: _____ ;		Other ECR Info : -	
Subnet Mask: _____ ;		ECR – POS Vendor: _____	
Gateway: _____ ;		ECR – Terminal Model: _____	
DNS Pri : _____ ;		POS Type: <input type="checkbox"/> Counter-Top <input type="checkbox"/> Self-Service Kiosk	
DNS Sec : _____ ;			

Product Offering & Segment:

EFTPOS:	Static QR:
<input type="checkbox"/> Standard	<input type="checkbox"/> SGQR
<input type="checkbox"/> CFC (NEA, HDB and JTC stalls)	<input type="checkbox"/> SGQR (F&B)
<input type="checkbox"/> Hawker	<input type="checkbox"/> Charity
<input type="checkbox"/> School Canteen	<input type="checkbox"/> Non Profit
<input type="checkbox"/> Charity	<input type="checkbox"/> CFC (NEA, HDB and JTC Stalls)
<input type="checkbox"/> Government	<input type="checkbox"/> SIMPLY
<input type="checkbox"/> Money Changer	<input type="checkbox"/> F&B (SIMPLY)
<input type="checkbox"/> Non Profit	
<input type="checkbox"/> Remittance	
<input type="checkbox"/> Self Service Kiosk	
<input type="checkbox"/> Temporary Terminal (Day)	
<input type="checkbox"/> Temporary Terminal (Month)	
<input type="checkbox"/> SIMPLY	
<input type="checkbox"/> Miscellaneous	
<input type="checkbox"/> Vending and Unattended	

For CFC Merchants:

Hawker Cooked Food (CFC2-CF) Wet Market (CFC2-WM) Coffee Shop (CFC2-CS) Industrial Canteen (CFC2-IC)

Others:

RID:	TID:	BF:	TF:
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Remarks:

Name (Sales Rep): Date: Signature:	Name (Head of Sales): Date: Signature:
Sales Code:	