PRINT

GetReporting.com Access Request Form

Part I - General User Information
(To be completed by User)

Company Name

Customer Service Phone Number

Name of User

Phone Number of User

Type of Request

☐ New Request ☐ Modification ☐ Deletion

Start Date | End Date

Title of User (if any)

User Email Address

Statement of Accountability: I understand my obligation to protect my password from disclosure. I am aware of all security measures that must be made to ensure that there is no compromise of cardholder information to which I am authorized to access. I assume the responsibility for the data and the systems for which I am granted access. If I exceed my authorized access, I understand that my access to the data may be terminated without notice.

User's Signature

Date

User's Name (printed)

Merchant ID Number

Part II - Access
(To be completed by User's Supervisor)

☐ Access Level ☐ Corporate ☐ Master Merchant ☐ Merchant

Supervisors Signature

Date

Supervisors Name (printed)

Supervisors Contact Number

Part III - Report Access
(To be completed by ISO)

☐ ACH Reports ☐ Chargeback Reports ☐ Credit Card Reports

☐ Funding Reports ☐ Qualification Reports ☐ Refunds

☐ Statements

Entity ID

Part IV - Account Creation
(To be completed by Processor)

Account Created By

Date Created | Deletion Date

INSTRUCTIONS -
Complete all fields in Section I and II. Incomplete requests may be rejected.
Print and sign in designated areas.
Fax to 972-503-9100

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