**Finance & Administration**

**Payment Card Merchant Agreement**

**Merchant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(As you would like it to appear on the customer statement)

This document with attachments specifies the agreement between the Lehigh University Treasurer’s Office and University Departments to give Departments the ability to accept credit cards from customers as an accepted form of payment for goods or services.

**SECTION I: Process Description**

**SECTION II: General Rules, Regulations and Guidelines for Merchants**

**SECTION III: Attachments**

**SECTION IV: Contacts**

**SECTION V: Signatures**

**SECTION I: Process Description**

* Lehigh University Treasurer’s Office has negotiated a University‐wide contract for merchant credit card processing services. University departments must use the merchant account processor approved under the master University processing agreement. This agreement provides the most cost effectiveness and greatest level of service and compliance.
* Cards accepted are Visa, MasterCard, and Discover. (Please contact the Treasurer’s Office if interested in AMEX)
* Electronic ticket capture is the transmission of sales to the credit card processor through the use of electronic equipment. Credit card terminals are the most common devices used for this purpose, and are recommended for low to moderate volumes. Other options for processing include PC software, cash register systems and internet processing.
* Merchant sales information is transmitted electronically to the authorized merchant services provider. The provider receives authorization and payment from the cardholder’s bank. Funds are then deposited into a University bank account.
* A department requests approval to become a credit card merchant from the University Associate Treasurer. Upon approval, Treasurer’s Office establishes a new merchant account with the authorized merchant services provider.
* The merchant services provider issues online (or paper) monthly statements per merchant account for reconciliation purposes.
* To become a Lehigh University Credit Card Merchant, a department must complete the **Lehigh University Request to Process Payment Cards** form found at the end of this document. The application contains Contact information, merchant location, Banner Account Codes for revenue/fees, equipment and processing method desired.
* The Credit Card Merchant must fill out a **Lehigh University Payment Card Merchant Change/Termination Request** in the event of any changes in the information provided on the Merchant Application Form. The Merchant Change/Termination Form is also included at the end of this document.
* The Merchant **must** batch out sales at the end of each day.
* The Merchant must reconcile their daily sales to the report generated when the terminal is batched out, to the University General Ledger, and to the monthly statement provided by the merchant service provider.
* **Merchants must contact the Treasurer’s Office in the event that they will be making any changes to their method of processing** after initial set up. Examples include changing from terminal based processing to processing through PC software, through a web site, or terminals built into cash registers. **All such changes must be approved by the University Associate Treasurer.**
* If a Merchant experiences or suspects a security breach of credit card processing systems and/or data, Lehigh University Treasurer’s Office must be contacted immediately. Call 610-758-3180.
* COMPLETE CREDIT CARD ACCOUNT NUMBERS OF CARDHOLDERS ARE NOT TO BE STORED IN ANY ELECTRONIC FILE IN ANY CAPACITY. IF NECESSARY, THE LAST FOUR DIGITS (ONLY) OF THE ACCOUNT NUMBER MAY BE CAPTURED.

**SECTION II: General Rules, Regulations and Guidelines for Merchants**

* All face‐to‐face transactions should have the payment card present and obtain a signature. Always verify that the card is valid and signed. Compare signatures and check for ID where possible and feasible.
* If it is not a face‐to‐face transaction, some other method must be used for securing the payment (i.e. mail in form with credit card information and signature, fax in signature, etc.). Request a signed authorization letter and obtain a signature of the cardholder as often as possible.
* Merchants may accept card numbers via phone, fax, and U.S. mail. NEVER ASK FOR CARD INFORMATION OR SOLICIT CARD INFORMATION VIA E‐MAIL.
* Merchants must keep all card numbers and information secure and confidential. Sensitive card information (full account number, type, expiration date, card validation code or track data) must **NEVER** be stored on any computer, database or server.
* Merchants agree not to disclose or acquire any information concerning a cardholder’s account without the cardholder’s consent. Merchants will not sell, purchase, provide, disclose or exchange card account information or any other transaction information.
* Merchants will keep an original copy, imaged copy or a microfilm copy of each credit card transaction for no less than 18 months. All card documentation containing card account numbers must be maintained in a secure environment limited to dependable, trustworthy and accountable staff. Secure environments include: locked drawers, file cabinets in locked office, and safes. Credit card receipts should typically be treated the same as you would treat large sums of cash. After 18 months, these materials must be destroyed in a manner that will render them unreadable. Your department will be responsible for any losses due to poor internal controls.
* A cash advance or withdrawal from your department to a cardholder, or to yourself, is not authorized. Merchants may not accept money from a cardholder and subsequently prepare a credit draft for the purpose of creating a credit to the purchaser’s account. The terminal may only be used for transactions related to purchases of Lehigh University goods and services.
* Merchants agree that the sales draft represents a bona fide, newly created transaction involving the merchandise and/or services itemized on the sales draft. A customer should not be charged before merchandise is shipped. In the case of an intangible product (i.e. Registration) process the charge to the customer when registration confirmation is sent.
* Merchants are required, in good faith, to maintain a fair policy for the exchange and return of merchandise and for resolving disputes over merchandise and/or services purchased with a payment card. If a transaction is for non‐returnable, non‐refundable merchandise, this must be indicated on all copies of the sales draft before the cardholder signs it. A copy of your return policy must be displayed in public view.
* Merchants will give proper credit for returns and adjustments by performing the proper function on the terminal. Under no circumstances should any card refund or adjustment be paid to a cardholder in cash. If cash is refunded and the cardholder files a dispute, your department will bear the loss of income from the transaction.
* All fees associated with processing of credit card transactions will be paid by the Merchant.
* Merchants will use only point of sale terminals or equipment supplied to the location by the Universitys’ merchant card processor. All equipment and systems must be configured to prevent retention of the full magnetic strip, card validation code, or PIN once a transaction has been authorized. If any account number, cardholder name, service code or expiration date is retained, it must be encrypted and protected according to the standards outlined in the Payment Card Industry (PCI) Data Security Standards.
* Refer to the attachments in Section III for additional documentation on Payment Card Industry Standards.
* This Agreement shall not become effective until approved by the University Associate Treasurer, and will remain in full force until terminated by either party by giving written notice to the other party.
* A signature on the following Payment Card Merchant Agreement indicates the department’s acknowledgement that all staff will abide by the rules and regulations stated herewith as well as those listed within the attachments referenced below.

**SECTION III: Attachments**

Lehigh University Policy for Accepting Credit Card Payments

Payment Card Industry Data Security Standard:

[*https://www.pcisecuritystandards.org/security\_standards/pci\_dss.shtml*](https://www.pcisecuritystandards.org/security_standards/pci_dss.shtml)

Visa Merchants Cardholder Information Security Program:

[*http://usa.visa.com/merchants/risk\_management/cisp\_overview.html*](http://usa.visa.com/merchants/risk_management/cisp_overview.html)

Mastercard International Rules Manual:

*http://www.mastercard.com/us/merchant/support/rules.html*

**SECTION IV: Contacts**

David Hammer, Associate Treasurer

Email: dlh5@lehigh.edu

Phone: 610-758-3180

Fax: 610-758-6528

**Elavon Merchant Account Customer Service**

Toll Free:          (800) 725-1245 option #1

Availability:       24 hours/day, 365 days/year

Lehigh University

**Request to Process Payment Cards**

**Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Campus Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Primary Contact: Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Banner Account for Deposits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**You will automatically be set up to accept MasterCard, Visa and Discover**

**Estimated Annual Credit Card Sales Volume: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Estimated Credit Card Average Sales Amount**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**% Credit Card Sales:** **Over the Counter: \_\_\_\_\_\_\_\_ Telephone/Mail:\_\_\_\_\_\_\_\_ Web:\_\_\_\_\_\_\_\_**

**Describe Method for**

**Processing Credit Cards: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(e.g., credit card terminal, website, PC software, outsourced to 3rd party, locally developed application)*

**Anticipated Number of Terminals Needed**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *NOTE: Each Terminal will need a shared or dedicated phone line.*

**Describe Product/Service**

**Being Provided to Cardholder**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Departmental**

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

**Please submit completed form to: David Hammer**

**Treasurer's Office**

**Alumni Memorial Building**

**Treasurer’s Office Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Lehigh University

**Payment Card Merchant Change/Termination Request**

**Merchant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Merchant Account #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Check appropriate action being requested:**

**CHANGE OF MERCHANT INFO:** 🞏 **TERMINATE MERCHANT ACCOUNT** : 🞏

**Check all boxes containing a change and indicate new information:**

**Contact:** 🞏\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Telephone:** 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:** 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Fax:** 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Banner Account for Deposits:** 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Credit Card Processing Method/Equipment:** 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Credit Card Terminal Cash Register or PC Software Internet:** 🞏\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If changing to new PC/Cash Register or Internet based system, please provide software manufacturer name,**

**application name and version number:**

**Departmental Approval Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Please submit completed form to: David Hammer**

**Treasurer's Office**

**Alumni Memorial Building**