Request for Expanded Credit-Return Capabilities

Authorize.Net will typically approve or deny a request for Expanded Credit-Return Capabilities (ECC) within two (2) business days of the receipt of a completed and signed request and will notify you of its decision.

Please print out and return the completed and signed form using one of the following methods:

- Through the Merchant Interface: Click **Contact Us** from the upper right corner of any page, click **Create a New eTicket**, enter a summary and description, then click **Submit**. After submitting your eTicket, attach this completed form and any documentation by clicking **Add** in the Attachments section of the eTicket details.
- Mail: **Customer Support, Authorize.Net P.O. Box 947, American Fork, UT 84003-0947.**

Request and Acceptance. The company listed below ("Merchant") hereby requests that Authorize.Net Corp. ("Authorize.Net") enable Merchant's payment gateway account with Expanded Credit-Return Capabilities for the length of time specified below. Expanded Credit-Return Capabilities is herein defined a feature that allows Merchant to credit a consumer's credit card or bank account regardless of the amount of the credit and/or regardless of whether a previous debit had ever been made to such credit card or bank account via the Authorize.Net Payment Gateway. Authorize.Net reserves the right to accept or reject any Request for any reason at its sole discretion.

Acknowledgement and Assumption of Risk. Merchant acknowledges that when enabled for Expanded Credit-Return Capabilities, all credit transactions processed through Merchant's payment gateway account will bypass the referential checks in Authorize.Net's Credit-Return feature, and anyone with sufficient permissions in the Merchant's payment gateway account will be able to issue credits to consumer credit cards or bank accounts without the standard security limitations that have been placed on regular merchant payment gateway accounts. Merchant acknowledges that there are risks associated with the activation and use of Expanded Credit-Return Capabilities, including, but not limited to, fraud, and Merchant expressly assumes all risks, pursuant to the terms of the Merchant's agreement with Authorize.Net regarding the use of Authorize.Net services (the "Agreement").

Termination. Merchant's right to use Expanded Credit-Return Capabilities, if and when Authorize.Net approves this Request, shall terminate the number of days specified following the date that Authorize.Net activates Expanded Credit-Return Capabilities for Merchant, or upon receipt of a written termination request to the Authorize.Net Finance Department (in this event, Authorize.Net will disable Expanded Credit-Return Capabilities as soon as practicable). Authorize.Net reserves the right to terminate Merchant's use of Expanded Credit-Return Capabilities pursuant to the terms of the Agreement at any time.

Merchant Information

Is your account less than 120 days old? ☐ **Yes** ☐ **No** **Previous Gateway ID** (if applicable)**:** _____

Accounts using the eCheck.Net service must have at least 120 days of eCheck.Net transaction history with Authorize.Net. If you previously had an Authorize.Net account with eCheck.Net history, please provide that previous Gateway ID in the field above.

Current Payment Gateway ID: _____	**Company Name:** _____

Principal's Social Security Number OR Company's Tax ID Number: _____	**Company Phone Number:** _____

Company Address: _____	**City/State/ZIP Code:** _____

Length of Activation

Length of time ECC should be enabled for your account (if no timeframe is selected, ECC will be enabled by default for 30 days only):   ☐   _____ **days (1-365)**   ☐   **Indefinitely**

Authorization – Account owner's signature required.

By signing below, you indicate that: 1) you are an authorized Account Owner or Account Administrator for your company; 2) you understand and agree to the terms of this request; and 3) the information being submitted is correct.

Print Name: _____	**Signature:** _____	**Date:** _____

Title: _____	**Phone Number:** _____	**Email Address:** _____

Address (if different from the Company)**:** _____