



iAccess Fee Addendum

Merchant Name: _____

Merchant Number(s): _____

Select One:

<input type="checkbox"/> Single Merchant Monthly Access Fee	\$14.95
<input type="checkbox"/> Chain Merchant Monthly Access Fee	\$30.00

By signing below and by processing, the Merchant hereby acknowledges and accepts the above listed fee and understands that the fee is required for the ability to utilize the iAccess online reporting tool through merchant's existing account. The applicable fee listed above is in addition to the fees currently assessed on the merchant account. Such fees are subject to change.

This addendum is an amendment to the Merchant Application and Agreement.

Merchant:

By: _____

Name: _____

Title: _____

Date: _____

Please fax the completed form to: National Payment Processing (800) 566-8528. The form must be signed by the authorized principal on the merchant account.