

UNIVERSITY OF FLORIDA
BANKING AND MERCHANT SERVICES – PAYMENT CARD OPERATIONS
COMMERCE APPLICATION FOR CREDIT CARD TRANSACTIONS

Requesting Department Name:	
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Contact Information:

Contact Name:	
Street Address:	
City:	
Phone Number:	
Email:	

Planned Business Processes:

Please indicate how your customers will pay for their items. Answers can be one or more.

Choice	Method
	CashNet eMarket Storefront (e-commerce)
	Card present (physical terminal)
	Other

If you selected **CashNet eMarket Storefront** (e-commerce) in **Choice**, please indicate how customers will be sent to the Storefront (i.e. URL from department website, via link sent by email, redirected from app, etc.).

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If you selected **Other** in **Choice**, please provide the name of the vendor and reasons why the University's approved payment solutions do not fully meet your needs.

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Please list the services or types of products you will be selling. If applicable, indicate the items to be sold by which method (**eMarket**, **Card present**, **Other**):

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Please describe your potential customers (i.e. public, students, suppliers/vendor, etc.):

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Please estimate the monthly number of:

Transactions:	
Revenue:	

Will anyone in your department have access to cardholder data?

Yes:	
No:	

If applicable, how do you plan to secure the storage, processing, transmission, backup and destruction of collected cardholder data?

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All funds must be deposited into a University of Florida account. The following chartfield string for revenue as well as processing and other fees applies:

Dept ID	Fund	Program	Account	Source	Flex	Project

Certifications (please initial): I understand that.....

I am responsible for the security and safeguarding of cardholder information as required by the Payment Card Industry Data Security Standard (PCI-DSS) and all applicable UF policies.	
Any Credit Card Commerce implementation may only go live once all pertinent approvals have been obtained by the Controller's Office.	
As a Credit Card merchant, there are fees associated with the acceptance of credit and debit card processed transactions. All incurred fees, including fees regarding PCI compliance efforts, will be charged to my department's account.	
All staff involved in the Credit Card transaction process described herein will complete the TRM125 Payment Card Security Awareness annual training requirements at hire and annually thereafter.	
Any third-party vendor must provide proof of PCI-DSS compliance.	
We are not permitted to sell advertisements on our departmental webpage. (Requirements can be found at https://marcom.ufl.edu).	
Payment Card Operations as well as the Privacy Office (https://privacy.ufl.edu) need to be notified immediately upon a suspected data breach.	
UF merchants are limited to a maximum amount of \$5,000 per transaction. This limit can be raised upon approval by the Controller's office.	

I confirm that I have read and familiarized myself with (please initial):

University of Florida Credit Card Standards: http://www.fa.ufl.edu/directive-categories/credit-card-operations/	
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Signatures:

Signature of Department Head or Director

Date

Printed name of Department Head or Director

Please complete this form and submit to:

Banking & Merchant Services, Payment Card Operations
PO Box 112008, S113 Criser Hall

Email: Treasury-CreditCards@ad.ufl.edu

Phone: (352) 392-9057

For Internal Use Only:

Who is Merchant of Record? (Attach Merchant Agreement)				
Does Merchant Agreement include language to satisfy PCI DSS.		Yes		No
Is Service Provider/Third Party Vendor PCI compliant? (Attach current Attestation of Compliance)		Yes		No
Is implementation Visa Product & Solution listed?		Yes		No
Is a completed risk assessment on file with UFIT Security?		Yes		No

University Controller's Office

Date

- ☐ Approved
☐ Not Approved