

ATM LOCATION TERMINAL PROFILE

Fax or email completed form to Convenience ATMs, Inc. 204 East South Street, Suite 6057 Orlando, FL 32801 Phone: 1-877-624-ATMS Fax: 1-866-757-2132 Email: info@convenienceatms.com

Terminal Number (office only)	
Participant Name (office only)	
Login Name (office only)	

ATM OWNER / OPERATOR'S INFORMATION: (this is the personal information of the ATM owner, <u>not</u> location info)
Items marked with an "*" are required items, we cannot process without this info
ATM Operator's Company Name (if sole proprietor leave blank):
ATM Operator's Name: [*]
ATM Operator's Address Line 1:* ATM Operator's Address Line 2:
City, State, and Zip:*
ATM Operator's Telephone:* ATM Operator's E-mail for: E-mail for Web Monitoring Setup:* E-mail for Monthly Statements: Email for Reg E Claims: E-mail for ATM Alerts:
ATM Operator's Social Security Number:*
ATM Operator's Date of Birth:*
Monitoring website requires a logon name, please write down your preference: Logon Name: Password: (an initial password will be emailed to you to the email address listed above, you can modify it after your initial login) ATM Machine itself requires a 6 digit pin number to access operator menus, (this pin number is NOT same as the vault combination, it is for ATM operator menus only) please write down your six pin number preference:
ATM Machine has capability to send you alerts via text message to your cell phone for "low on cash" and other errors. If you would like to activate this feature please provide your sms text message address (example 4078771234@txt.att.net) if you do not know this please provide your cell phone number and cell phone service provider. Cell phone number: Service provider:
What low on cash amount do you want to be alerted for (example \$500, when the machine goes below \$500 you will be alerted): \$
PHYSICAL LOCATION OF ATM:
Location Name / (if different from company name) example: "Joes Bar and Grill":*
Property Type (convenience store, supermarket, bar, etc):
Location Address Line 1:*
Location Address Line 2:
City, State, and Zip:*
Location Contact Name:
ATM Surcharge Amount desired.* \$

Type of connection to ATM Network (phone, TCP/IP cable connection, WIFI, cellular router): _