

**APPENDIX FOUR: LOCAL DEBIT CARD ACCEPTANCE SERVICE (LDCAS)**

| ACCOUNT DETAILS  |  |
|--|--|
| Details of the Account to be affiliated with Local Debit Card Acceptance Service |  |
| Account Number   |  |
| Account Name   |  |

| SERVICE DETAILS  |                              |                             |
|--|------------------------------|-----------------------------|
| New Application Request  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Total Number of Terminals Required (details of Terminal requirements to be outlined in Table 1 below): |                              |                             |

| Service Features to be enabled on all Terminals  |  |
|--|--|
| (Sales & Refund options will be automatically enabled, please tick to select further service features, below): |  |
| Cashback   |  |
| Gratuuity (Tips option)  |  |
| Pre Authorisations   |  |

| Outlet Name | Location | Total No. LDCAS Terminals | Terminal Details |          |
|-------------|----------|---------------------------|------------------|----------|
|             |          |                           | iPods            | Printers |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |
|             |          |                           |                  |          |

Customers should note that where Bank of St Helena printers are not utilised by businesses as a part of the Terminal equipment loan, Bank of St Helena will not support and/or be liable for any equipment used by the Business Establishment, for the Local Debit Card Acceptance Service that is not owned by the Bank

| SERVICE REQUIREMENTS   |                          |
|--|--------------------------|
| Please tick to confirm that all technical requirements to enable the service have been met<br><i>(Wireless Internet Access, Spare Local Area Network Connection, Windows Host PC/Laptop)</i> | <input type="checkbox"/> |



**CUSTOMER AGREEMENT**

It is hereby confirmed that *(please tick the boxes provided and sign below to confirm agreement)*:

|  |                          |
|--|--------------------------|
| 1. The Business/Organisation/Charity has read and accepted all applicable Terms & Conditions of the Local Debit Card Acceptance Service and agree to offer this service in accordance with these Terms & Conditions as set by Bank of St Helena Ltd.   | <input type="checkbox"/> |
| 2. The Business/Organisation/Charity agrees to the use of the Local Debit Card Acceptance Terminal equipment which shall be on loan, free of charge from Bank of St Helena Ltd, and shall use the Terminal equipment in accordance to the relevant terms or conditions of the Service. The Business agrees that all relevant Terminal equipment will remain the property of Bank of St Helena Ltd. | <input type="checkbox"/> |
| 3. The Business/Organisation/Charity agrees to all relevant Local Debit Card Acceptance Service fees and charges.  | <input type="checkbox"/> |
| 4. The Business/Organisation/Charity will promptly notify the Bank of any changes in the above details.  | <input type="checkbox"/> |

**AUTHORISED SIGNATORY ONE**

|            |  |
|------------|--|
| Full Name: |  |
| Date:      |  |
| Signature: |  |

**AUTHORISED SIGNATORY TWO (If required)**

|            |  |
|------------|--|
| Full Name: |  |
| Date:      |  |
| Signature: |  |

**FOR BANK USE ONLY**

| Bank Processing                             | Signature | Date |
|---|-----------|------|
| <b>Compliance &amp; Operations</b>          |           |      |
| LDCAS Application Approved for processing:  |           |      |
| <b>IT</b>                                   |           |      |
| LDCAS Application Received                  |           |      |
| LDCAS Setup                                 |           |      |
| LDCAS Setup Verification                    |           |      |
| LDCAS Premise Installation & activation     |           |      |
| LDCAS Pack issued to Business Establishment |           |      |