

# Additional Point of Sale Services Form

## Merchant Basic Information Details (Must complete this section correctly to ensure service delivery)

Company/ Establishment Name: ..... Owner/Delegate Name: .....

Mobile No: ..... Commercial Registration Number: ..... Business Type: .....

Current Terminal No: ..... Email Address: .....

Please select one of the services shown below, and fill in all related fields, if applicable:

Add Terminal     Change Account     Change Terminal Location     Replace Terminal     Update Merchant Information     Cancel Terminal     Purchase with Cash Back

## Request Details

Store Name English		Store Name Arabic	
Phone Number		Installation location	
City		Email Address	
Current Account Number		New Account Number*	
Name of the Delegate (In Installation Location)		Delegate's Mobile Number (In Installation Location)	Terminal Number **

\* Only if the request involves changing/updating the current account number  
 \*\* Only if the request involves replacing or cancelling a terminal

### Please choose the type of the Terminal in case of requesting an additional or a replacement.

Terminal Type	<input type="checkbox"/> Dialup  Quantity ( )	<input type="checkbox"/> GPRS  Quantity ( )	<input type="checkbox"/> Soft POS  Quantity ( )
---------------	--------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------

National ID	Date of Birth	Mobile number	Email address

### General Instruction:

- In case of change in business nature, please provide us with a copy of the new commercial registration, taking into account that the fees will be subject to the current agreement.
- In case of request to change the account number, kindly submit the form signed, stamped and visit your nearest SNB branch.
- In case of request to change the account(s) of multiple terminals, provide a list containing the followings (Terminal Number - Old Account - New Account) with the stamp and signature.
- In case of request for multiple terminal(s), provide a list containing all desired terminals locations.
- In case of misuse or terminal damage, it will be replaced at the Merchant's cost.
- Merchants must submit a cancellation form/letter along with the terminals upon service termination.
- The request must be signed by the authorized person(s) to avoid rejection.
- In case of multiple request(s), a separate form for each request should be submitted to avoid rejection.
- To submit the original form to the bank, please visit your nearest SNB branch.
- If the monthly total transactions of PoS terminal does not reach 14,999 SAR, SNB will charge the merchant 100 SR per terminal per month.

This form is subject to the PoS agreement which was signed previously by the Merchant and the Bank.  
 I hereby acknowledge that the above information are correct and I agree and commit to the above mentioned instructions

