USA**e**PAY

SSL Certificate Request Form

Complete and email to 706@usaepay.com

Company DBA Name: _____

Merchant Name: _____

Phone Number: _____

Merchant Username: _____

E–mail: _____

Operating System: Windows ☐   MacOS ☐

Web Browser: Chrome ☐   Firefox ☐   Safari ☐   Opera ☐

I hereby authorize USAePay to issue a SSL Certificate to the username listed above. I understand that by doing so, my username will have access to the full credit card numbers and expiration dates stored in my gateway account. I accept responsibility for the use and safe storage of this certificate.

Merchant Name: _____

Merchant Signature: _____

Date: _____/_____/_____