Point -of-Sale and Internet Sales Approval Form for Departments

Department name:			
Address:			
Contact person:			
Phone number:	Fax number:		
e-mail address:			
Purpose/reason for request:			
Cards accepted:	MC/Visa/Discover	American Express	
Cost Center/WBS element to be ch fees:			
Estimated dollar amount of monthl	y activity:		
Estimated dollar amount of yearly	activity:		
Avg dollar amount per transaction:			
Name of Point to Point Encryption Solution Provider (if applicable):			
Name of Point to Point Encryption Solution (if applicable):			
Name of 3 rd party e-commerce provider/processor (if applicable):			
Responsibilities:	 Settle batches timely Respond to chargeba 		
	 Respond to chargeback/retrieval requests timely. Reconcile transactions to department ledger(s) and monthly merchant statement Record transactions timely in IRIS. 		
	Report security breaches immediately.		
	 Document sales policies and procedures and obtain review from UT Audit and Consulting Services. 		
	 Secure/protect card number information at all times. Other responsibilities as defined in University Policy FI0310 and FI0311. 		
	 Complete appropriate PCI self-assessment questionnaire and maintain PCI Data Security Standards compliance. Verified 3rd party e-commerce provider is PCI Data Security Standards certified (if applicable). 		

My signature below certifies that I have read and understand Policy FI0310 and FI0311 and agree to the responsibilities listed above.

Print	Sign	Print	Sign
Date		Date	
Contact Person		Department Head	
Approvals			
Print	Sign		Date
Position of Authority for I	nformation Technology		
Print	Sign		Date
Chief Business Officer			

Return completed form to Justin Holt with the Treasurer's Office at holt@tennessee.edu