



**Termination Request Form**

In order to comply with security / privacy standards, you must submit this request in writing and fax directly to our Support Department.

**NOTE: Termination of your Merchant Account does NOT terminate your American Express account, nor does it terminate your e-commerce payment gateway (e.g. Authorize.net), if applicable. You must contact those companies DIRECTLY to terminate those accounts.**

If this request is received after the 21st of the month, termination is effective the 1st of the following month. It is recommended that you review the terms of your Merchant Agreement PRIOR to terminating.

**This request can only be made by an individual expressly authorized by Merchant.**

**Our fax number is: 866.496.9841**

**Required information:**

**Doing Business As Name:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Merchant ID Number (required):** \_\_\_\_\_

**(Your merchant ID Number can be found on the monthly Visa/MC statement mailed to you)**

**Please explain in detail why you are terminating your Merchant Account:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Effective Date:** \_\_\_\_\_

By signing below, I expressly authorize Merchant Focus or its affiliate to fulfill the above request in connection with my Merchant Account and understand that all applicable and surviving terms and conditions of the Merchant Agreement remain in effect.

**Owner/Officer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Owner/Officer Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_