

**REQUESTOR Information**

Name: Dawn Stotler - AM Phone Number: (301) 766 - 5789 Date: \_\_\_\_\_

**ACCESS Information**

<p style="text-align: center;"><b>Merchant Access Number</b></p> <p>12 Digit Outlet or Chain Number: _____</p> <p>Users require access to Dispute Manager?  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p style="text-align: center;"><b>Viewing Access Level (Check one)</b></p> <p><input type="checkbox"/> Outlet (Merchant No.)</p> <p><input type="checkbox"/> Chain (Participant)</p>
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**Assignment of User Access and User Maintenance**

*This form will be completed through DocuSign for initial setup. After that point, ClientLine Customer Support Center will provide all user maintenance services (e.g., password resets, etc.). Their number is 800-285-3978.*

**USER Information**

*Instructions: Print name, email address, fax & phone number of requested users that you are authorizing to access ClientLine. The users listed below will be required to accept the online terms & conditions.*

**Users to be assigned access to ClientLine**

Name	E-Mail Address	Phone # (Required)

**Users to be removed from access to ClientLine**

Name	E-Mail Address	Phone # (Required)

**Required Signatures**

<p>Merchant/Chain Name: _____</p> <p>Print Name: _____</p> <p>Signature: _____</p>	<p><b>Bank Channel or RM (Required for Chain Level or Higher) (STMS Use Only)</b></p> <p>Bank Name: _____</p> <p>Print Name: _____</p> <p>Signature: _____</p>
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**STMS Use Only:**

User ID(s) Assigned: \_\_\_\_\_

Information on ClientLine, including terms and a guided tour can be viewed at: <https://www.myclientline.net>