Merchant Card Deactivation Form
SunTrust Merchant Services / State of NC

INSTRUCTIONS
1. This form is to be used to request a Merchant Account to be deactivated and closed. This includes:
   - ➤ Requesting call tags for the return of Rented or Leased POS terminals

2. Unless otherwise directed, all forms will be processed electronically through DocuSign.

3. Any questions should be directed to osc.form.merchantcard@osc.nc.gov

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Merchant Chain (Participant):

Merchant Chain Number: _____

Merchant Outlet to be Deactivated:

Merchant Outlet Name: _____

Merchant Outlet Number: _____

American Express Outlet Number (if applicable): _____

Equipment Information (if applicable):

Terminal ID(s) of equipment being returned: _____

Terminal Model(s): _____

**If terminals will not fit in 1 box please tell us how many return labels you will need: _____

Return Labels should be shipped to:

Address: _____

City: _____

State: _____

Zip Code: _____

ATTN: _____

First Data Use ONLY:

Account Closed: Date: _____

Completed by: _____