



Petition for Approval of Alternate Credit Card System

References: Minnesota Rule Part 7404.0500 subpart 8a and Part 7406.0500 subpart 7b
Credit Card Acceptance for Driver License Agents and Deputy Registrars

A Driver License Agent and/or Deputy Registrar may apply for approval to process credit card transactions on point-of-sale or other alternate information system by completing the application below. The request will be reviewed with a reply within 30 calendar days of receipt. In cases where additional information is requested the review and reply will be within 30 calendar days of receipt of the additional information.

Instructions:

Complete form; print, sign and date.

E-Mail this form and any supplemental material to: dvs.deputycreditcard@state.mn.us.

Subject line: ATTN: FRANKIE- Credit Card Variance

Retain copy for your records.

If you have questions or need additional information please email Frankie at: dvs.deputycreditcard@state.mn.us.

DL Agent/Deputy Registrar Section

Name of Office _____ Deputy / DLA Number _____

Address _____ Contact Name / Phone Number _____

Contact Email _____

Petition Date _____ Name of Vendor _____

Attach the following to this application:

- Attach a written statement from the vendor stating whether or not the system is able to connect with the State of Minnesota banking vendor, US Bank and the credit card processor, Elavon. If the statement is affirmative please provide a description detailed enough to demonstrate how connectivity is achieved.
- Attach a statement from the vendor indicating a new merchant ID will be established using your taxpayer ID.
- Attach a written statement from the vendor and appointee indicating that the service fee rate is the same as that set by the State of Minnesota banking vendor, US Bank, currently 2.49%.
- Attach a statement from the vendor and appointee affirming that there is and will be no cost to DPS-DVS for the operation and maintenance of the alternate systems.

Additional information for consideration:

(e.g. description of system's relationship to appointee's finance and business model and / or organization)

I attest to the accuracy of the information provided in this petition.

Deputy Registrar or DL Agent Appointee Date
*Signature from the Deputy Registrar or Driver License appointee only.

Central Office Use Only

Approved _____ Denied _____

Need more information _____

X. _____ Date
DPS-DVS Representative