

ELECTRONIC PAYMENT ADVICE (EPA) APPLICATION

MERCHANT/CUSTOMER DETAILS	MERCHANT NUMBER
Company:	Merchant number:
Street/Nr.:	Merchant number:
Postcode / Town:	Merchant number:
EPA Contact:	Merchant number:
Phone:	Notes:
Fax:	
eMail:	
Preferred file name:	

FORMAT OF THE EPA FILE

Masking of card number: yes no

Format: EPAGR (German) GRRCN (Global) EPAPE (Europe)

if GRRCN: CSV TAB Fixed length

if EPAPE: CSV Fixed length

Frequency of the EPA file: daily weekly monthly

if „Format: GRRCN“ was selected, only „daily“ can be selected here.

INTERFACE FOR THE EPA FILE

new interface

SFTP username if existing interface:

DECLARATION OF CONSENT AND EXEMPTION

We hereby issue American Express Payments Europe, S.L. - Austrian Branch, the order to deliver the electronic data (EPA) of the adjacent merchant number(s) to our **contracted service providers (see below on the left)**. The data is used exclusively for accounting purposes and is treated within the framework of data protection regulations.

We hereby issue American Express Payments Europe, S.L. - Austrian Branch, the order to deliver the electronic data (EPA) of the adjacent merchant number(s) to our **contact person (see above)**. The data is used exclusively for accounting purposes and is treated within the framework of data protection regulations.

American Express Payments Europe, S.L. - Austrian Branch, assumes no liability for any loss, theft or alteration of the data, as well as any damage caused by unauthorized access or any unauthorized use of the data, which arise as a result of the transfer of the data to the service provider and the data processing by the service provider. In this context, we provide American Express Payments Europe, S.L. - Austrian Branch, completely free from all claims of those affected and third parties.

COLLECTION OF THE EPA FILE

The Merchant above is commissioning the following service provider with the collection:

Company:

Street/Nr.:

Postcode / Town:

EPA Contact:

Phone:

Fax:

eMail 1:

eMail 2:

We also refer to the regulations in the terms and conditions for merchants.

I have read the explanation above and wish an implementation for the merchant number stated.

Name:

Position in the company:

Date: Y Y M M D D

Legally binding Signature merchant

PLEASE SEND PER EMAIL TO:

PaymentsConsultingGroupGermanyandAustria@aexp.com

Transmission by email is not always secure and American Express assumes no liability for inspection or possible changes by unauthorized third parties.

ALTERNATIVELY SEND TO:

**American Express Payments Europe, S.L. - Austrian Branch,
Kärntner Strasse 21-23, 1010 Wien, Austria**

