



**Cal 1 Card Office** / University of California, Berkeley / 180 César Chavez Center / Lower Sproul Plaza / Berkeley, CA 94720-2264  
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## Cal 1 Card Debit Program On-Campus (Affiliate) Merchant Application University of California, Berkeley

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Name of Business

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Business Address (include City and Zip Code)

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Business Web Site

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Name of Store Manager

Store Manager Phone Number

Store Manager Email

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Business Phone Number

Business FAX Number

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Corporate Owner Name (the entity which owns the above business)

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Corporate Owner Address (include City and Zip Code)

Corporate Phone

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Name of State where business was incorporated

Type of Corporate Entity (example: Sub S Corp., C Corp.)

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Number of years in business

Years business has been in this location

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Type or Description of Business (example: Fast Food, Convenience)    Do you have a cabaret license? (Yes / No)

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Reimbursement Address (where you want the checks mailed)

Please state briefly the nature of your business:

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