

## RefundOne™ Sign Up Sheet

**Company Information:** (This information will determine where supplies and incentives are to be sent)

Company Full Legal Name:		Doing Business As:	
Company Street Address	City:	State:	Zip Code:
Company Phone Number:		Company Fax:	
Are you classified as a BHPH, Independent Dealer, Franchise or both BHPH and Independent?			
Hours of Operation:			
Number of Company Locations:		Do you want to sign up additional locations? Yes or No	

**Note:** If additional locations to be signed up, please complete another sign up sheet for each location.

**Owner Information:** (SS# required to obtain EFIN and for Republic Bank Application)

Primary Owner Name:	Owner DOB	Owner SS#
Primary Owners Complete Home Address:		
Primary Owners Cell phone:		
# of years in business:	Ownership Type(ex: Sole Proprietorship, Corp, Partnership)	

**Contact Name at company:** (This is the primary person that will be using the software, be trained on it and get incented)

Contact Name:	Contact DOB:
Contact cell Phone:	Contact Email Address:
Contact Complete Home address:	

Please list any additional persons to be trained or to receive incentives below:

Contact Name:	Contact DOB:
Contact cell Phone:	Contact Email Address:

**Please check on which registration you are completing for your Sign Up Fees (with this fee you will receive a media kit for the 2010 tax season):**

Early Registration fee if signed up by 07/31/2009 is:	\$199.00 _____
Regular Registration if signed up by 10/31/2009 is:	\$249.00 _____
Late Registration for all sign ups after 12/15/2009 is:	\$399.00 _____

**The IRS requires that each company location transmitting electronic returns has what is called an EFIN number. For more information on the EFIN requirements please contact a RefundOne AE. Also, the bank that will be providing you checks to print the RAL/ERC checks also requires pertinent owner information for when they review your application as you complete their underwriting process. The owner of the EFIN will be responsible for the handling of the bank checks.**

**EFIN Information:**

Have you completed tax interviews at your location in the past and offered RAL's and ERC's?
If you have offered RAL's and ERC's in the past, which Bank did you participate with?
How many years have you been offering RAL's/ERC's?
Do you already have an EFIN # with the IRS? If so please provide that number
If the person applying for the EFIN is other than the owner of the company please provide the following:

EFIN Applicants Name:	EFIN Applicant DOB:
EFIN Applicant SSN:	

Would you be interested in learning more about AppOne, an indirect lending solution? \_\_\_\_\_  
 Would you be interested in learning more about Wolters Kluwer Red Flag tool kit or Bankers Systems Contracts? \_\_\_\_\_  
 Who referred you to the RefundOne Program? Stacey Davidson, or list other: \_\_\_\_\_

Name on Bank Account (please include copy of voided check)		
Bank Name:	Is this a Savings or Checking Account?	
Routing #	Account #:	Branch Location:

**Total Fees to be Charged to Bank account**

Circle registration type- Early, Regular or Late and indicated fee listed on application:	\$ _____
Total Fees to be charged:	\$ _____

The undersigned hereby authorizes AppOne Services, Inc. to initiate an ACH debit from the account listed above in order to pay for the RefundOne Program for the 2010 tax season. This is a one time debit/charge to your account for the total amount calculated above. By signing below you also agree to the terms and conditions of the RefundOne Customer Agreement. Please note all fees are non-refundable after 3 business days of receipt of this sign up sheet.

\_\_\_\_\_  
 Authorized Signature of Owner

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed Name of Owner

**Please Fax this completed form with a voided check back to 866-311-1742. If you have any questions on completing this form please call Stacey at 877-277-6631 ext 309. Thank you.**