



# STATE BANK OF MAURITIUS LTD

## MERCHANT PRE-SCREENING

Merchant URL (Website)	www.directecig.com
Company Legal Name	Directe Inc.
DBA Name	N/A
Line of Business	electronic cigarettes and accessories
Merchant Address Line 1	2338 Immokalee Rd #419 (mailing address)
Merchant Address Line 2	9220 Bonita Springs Rd #203, Bonita Springs, FL 34135 (principle address)
City	Naples
State (if applicable)	FL
Postal/ Zip Code (if applicable)	34110
Incorporated Country	US
Registration/ Incorporation Date	3/22/10
E-Mail	wes@1msm.com
Telephone	888-217-9026
Fax	239-333-1513

First Name	Wesley	Same	Same
Last Name	Christensen		
Address Line 1	27541 S. View Dr		
Address Line 2			
City	Bonita Springs		
State (if applicable)	FL		
Postal/ Zip Code (if applicable)	34135		
Country of Origin	US		
Passport/Driver's License Number	047503849		
Title	President		
E-Mail	wes@1msm.com		
Phone	239-571-1131		

Name	Wesley Christensen	Wesley Christensen	Wesley Christensen
Telephone	329-571-1131	329-571-1131	329-571-1131
Fax	239-333-1513	239-333-1513	239-333-1513
E-Mail	wes@1msm.com	wes@1msm.com	wes@1msm.com

Maximum Number of Transactions	200	1,200	4,500
Maximum Transactions Volume (USD)	10,000	65,000	250,000
Maximum Number of Transactions per card	2	2	4
	60.00		250.00

looking for additional processing for expanding market area	
Complete description of goods and services on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Price displayed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the merchant state that it will attend to customer service request within 2 working days?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
The address of the company is on the site?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Privacy Policy on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Return, refund, and cancellation policy on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Delivery Policy (to include export restrictions, if any) on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Restriction
Shipping options, delivery timescales, and shipping fees on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Transaction currency or currencies displayed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Display of VISA logo on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Display of MasterCard logo on website?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Site/Payment Page is SSL Secured	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
All products apply to the same MCC code	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Please check the type(s) of payment methods that you would like to be validated.	Visa <input checked="" type="checkbox"/> MasterCard <input checked="" type="checkbox"/>
Processing Type	<input type="checkbox"/> 3D Secure <input type="checkbox"/> Non-3D Secure <input type="checkbox"/> Mail Order/Telephone Order (MoTo)
Please check the currency or currencies in which your products and/or services are sold:	<input checked="" type="checkbox"/> USD <input type="checkbox"/> EURO <input type="checkbox"/> GBP <input type="checkbox"/> MUR <input type="checkbox"/> Other (please specify)
Are goods/services based on order forms signed by customers?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Do you have a credit limit policy on your casino? (if applicable)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If Yes, Please detail:	N/A
Detail all fraud tools used	AVS, CVV
Other payment methods used	check

Do you have customer support?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, how does it work? Please provide details below :	
customer can call toll free number or e-mail to support for assistance	
Is this product/service fulfilled at the time of the sale?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If no, please state the turnaround time from order to dispatch/ delivery timescale	card is charged at time of shipping - within 24 to 48 hours of order
Methods of Delivery	FedEx / USPS
Where are stocks of products kept?	On site
Where products are sourced?	Florida
Is insurance offered in case product is damaged?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Does supplier(s) have appropriate license(s)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does your company fulfill the orders directly?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If no, please provide fulfillment company details below:	
Company Name:	
Address:	
Contact Name:	
Telephone:	
Email Address:	

How do you prove delivery?

Adult signature on all Kit orders via  
FedEx - delivery confirmation via USPS  
for accessory orders

Ever processed credit cards before	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
6 months processing history provided to SBM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Last 2 years Financial Statements (audited preferred) for parent company and merchant provided to SBM	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Years of Experience in eCommerce/ Age of eCommerce Business	Years 1	Months
Processing Bank's Name	Payment Systems Worldwide	
Reason for leaving processor (if applicable)	N/A	
Current Total Annual Income: \$	1,200,000	
Current Chargeback to Sales Ratio	2%	
Have you provided company's business plan?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Does the website owner control the site content?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Do you provide services to websites that are not fully owned by you?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Please detail all the membership packages and prices available	see website	
Do you have free trial membership?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Please describe your strategy on end of the free trial membership (if applicable)	N/A	
Do you require registration and credit card details before the free trial membership? (if applicable)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, do you send it for pre-authorization?	N/A	
Which Media do you use to draw your customer's attention to your site?	e-mail, banner ads	
Do you offer tangible goods?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
How do you offer your products/services?		
	Internet %	100
	Direct mail/telemarketing %	0
How do you receive your customer's order?		
	Internet/SSL %	95
	Mail order/Telephone order %	5
How are orders processed?	customer enters information in to online order form	
Target Market (major markets targeted)	online shoppers	

**The following documents need to be provided as attachment to this Merchant Pre-Screening Form:**

1. Due Diligence Documents of the Directors, Shareholders and Beneficial Owners, which include:
  - 1.1 Curriculum Vitae (C.V.)
  - 1.2 Copy of Passport
  - 1.3 Bank Reference
  - 1.4 Proof of Address
2. 6 Months processing statements showing chargebacks (details of previous relationship with an acquirer: Name of Acquirer, Sales Volume, Chargebacks and Frauds history).
3. Financial Statements (Profit and Loss Accounts, Balance Sheets and Cash Flow Statements) for the past 2 years (audited preferred).
4. Copy of Certificate of Incorporation for existing parent company.
5. Incorporation Documents showing Directors & Shareholders and Beneficial Owners
6. Detailed Business Plan including Operations Review ,Organisational Structure, Financial Highlights, Credit Card Security Procedures, bio/resumes of key members of the management team

**Specific Specifications and Warranties**

The Merchant acknowledges pledges and warrants to the Bank that;

1. The Merchant is not engaged in or affiliated with any business, products, or methods of selling other than those listed in this Application.
2. There is no action, litigation, and proceeding pending which may impair the liability to carry business substantially and/or affect the financial condition or operations.
3. All intended transactions are bona fide. No transaction involves the use of a card for any purpose other than the purchase of goods and services as indicated in this merchant application form.
4. No owner with voting control of the company, or with more than 5 % of the shares, nor any signer of this agreement or senior officer of the Merchant's organization, has been charged, arrested, or convicted within the last five years of any criminal activity.
5. The products and services sold are not illegal in the country in which it is sold or to the customers to which they are sold.
6. The merchant has not been terminated by other banks, processors or third parties for the business indicated in this merchant application as well as for other businesses.
7. All information has been provided accurately and without omissions or misleading statements and no information has been withheld.

Name: Wasley Christensen

Signature: 

Pre-Approved <input type="checkbox"/> Declined <input type="checkbox"/>											
Reason of Decline (if applicable)											
Brand	Visa <input type="checkbox"/> MasterCard <input type="checkbox"/>										
MCC											
MSC											
Rolling Reserve											
Transaction Fee	<table border="1"> <thead> <tr> <th>PROCESSING CURRENCY</th> <th>FEE</th> </tr> </thead> <tbody> <tr> <td>USD</td> <td><input type="checkbox"/></td> </tr> <tr> <td>EUR</td> <td><input type="checkbox"/></td> </tr> <tr> <td>GBP</td> <td><input type="checkbox"/></td> </tr> <tr> <td>OTHER:</td> <td></td> </tr> </tbody> </table>	PROCESSING CURRENCY	FEE	USD	<input type="checkbox"/>	EUR	<input type="checkbox"/>	GBP	<input type="checkbox"/>	OTHER:	
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Web Analysis	<input type="checkbox"/>										
Comments											