# UAF eCommerce Request Form

**Campus:** UAF  
**Bursar’s Office Contact:**  
Ana Brown  
Contact Phone: 907-474-6191  
Email: aubrown@alaska.edu

**Department Requesting:** ________________________________  
**Primary Department Contact:** ________________________________

**Email:** ___________________  
**Phone:** ____________

**Address of Physical Location:**  
________________________________________________________  
________________________________________________________

**Website URL:** ________________________________

**Fund/org to be charged for monthly processing fees:** _____________________________ / ____________________________________________________________________________________

**Reason for Request:**  
________________________________________________________________________________________________  
________________________________________________________________________________________________  
________________________________________________________________________________________________

**uStore:**  
(List all detail codes that will be used. Use an additional sheet if necessary.)

**uPay:** ____________________________

**One time use or continual:** ____________________________  
**Projected transaction volume per month:** ____________

By signing below, I attest that I will sign and forward a PCI Security Agreement Form to the Bursar’s Office within one week of request. By doing so, I understand this means I have read and understand the University of Alaska Administrative Policy of Payment Card Industry (PCI). Furthermore, I understand that failure to do so may result in a loss of credit card processing privileges. Requests will not be honored without PCI Security Form from Primary Contact.

**Name:** ____________________________  
**Signature:** ____________________________  
**Date:** ____________________________  

**FBO Approval:** ____________________________  
**Date:** ____________________________