REQUEST FOR AGENDA PLACEMENT FORM

Submission Deadline - Tuesday, 12:00 PM before Court Dates

SUBMITTED BY: Jennifer Cagle   TODAY'S DATE: 03/21/22

DEPARTMENT: Constable Pct. 3

SIGNATURE OF DEPARTMENT HEAD: _____

REQUESTED AGENDA DATE: 03/28/22

SPECIFIC AGENDA WORDING:

Consideration to approve the Johnson County Constable's Office Pct. 3 to take payment

from customers by credit card using Certified Payments, a division of Accelerated Card Company, LLC

and authorizing County Judge Roger Harmon to sign the CertPay Bureau Account Setup Form

COMMISSIONERS COURT

MAR 2 8 2022

Approved

PERSON(S) TO PRESENT ITEM:

Constable Matt Wylie

SUPPORT MATERIAL: (Must enclose supporting documentation)

TIME: ACTION ITEM:
(Anticipated number of minutes needed to discuss item)   WORKSHOP:
                                               CONSENT:
                                               EXECUTIVE:

STAFF NOTICE:

COUNTY ATTORNEY: IT DEPARTMENT:

AUDITOR: PURCHASING DEPARTMENT:

PERSONNEL: PUBLIC WORKS:

BUDGET COORDINATOR: OTHER:

This Section to be completed by County Judge's Office

ASSIGNED AGENDA DATE: _____

REQUEST RECEIVED BY COUNTY JUDGE'S OFFICE:

COURT MEMBER APPROVAL: _____   DATE:

CERTIFIED

Bureau Account Setup Form

(Hereafter, Agency/Department is referred to as Bureau) Please complete the following questions to the best of your knowledge. If you need assistance, contact your sales representative or a member of our Account Executive team at 866-539-2020.

1. Bureau Location

Please complete the basic location information for your agency/department

Bureau Name *

Johnson County Constable Pct. 3
ex. Harris County, TX Property Tax

Federal Tax ID *

75-6001030

Bureau Description

fee payments
ex. Online Property Tax Payments, Court Fines and Fees Payments

Population

180000
City or County Population

Phone *

(817) 202-2985

Fax

(817) 790-2592

Agency Website *

Time Zone *

Central   ⌄

johnsoncountytx.org

Physical Address (No PO Boxes) *

206 N. Baugh St.
Street Address

Street Address Line 2

Alvarado   Texas   ⌄
City   State

76009
Zip Code

2. Bureau Contact Information
Please list main contacts and account administrators.

User Administrator *   **Title** *

Jennifer Cagle   Office Manager
First and Last Name

Email *

jcagle@johnsoncountytx.org
example@example.com

Phone Number *

(817) 202-2985

Notices and Changes *
☑ Same as User Administrator
☐ Other

Chargebacks *
☑ Same as User Administrator
☑ Same as Notices and Changes

☐ Other

3. Bureau Type, Payment Channels and Current Volume
Please provide the type, payment channels and payment volumes for the bureau.

Bureau Type *

☐ Tax   ☐ Utility

☐ Court/Clerk   ☐ Motor Vehicle

☐ Justice of the Peace   ☐ Parks and Recreation

☐ Misc. Government Services   ☑ Constable Pct. 3

Payment Channel(s) *

☑ Counter (POS)   ☐ REST API Integration

☑ Web (Online)   ☐ Existing Integration Partner

☐ IVR (Automated Phone Payments)   ☐ GenericSTI Integration

Payment Methods *

☑ Visa   ☐ eChecking/Savings

☑ Discover   ☑ American Express

☑ Mastercard

Pricing Model

◉ Service Fee (CertPay)   ○ Agency Absorbed (ACC)

Card Service Fee Rate   **Minimum Service Fee Rate**

2.4% $1.00

Estimated/Requested Go-Live Date for Selected Payment Channels *

04-01-2022

Date

Additional Go-Live/Implementation Details

Average Ticket Size *	**High Ticket Size** *	**Average Monthly Volume** *
$85.00	$195.00	$1200.00
Est. average transaction amt	In previous 12 months	In previous 12 months

High Monthly Volume *	**Annual Volume** *	**Annual Volume (CC)**
$2400	$20000.00	0
In previous 12 months	Gross Payment Collections	Credit/Debit Card

*If available, please provide previous processing/merchant statements detailing your current processing volumes.

4. CertPay Product Customization

Certified Payments Consumer Web and QuickSTI Counter Payments are customizable in many ways. These options can assist you in accounting for different payment types and applying payments appropriately.

PAYMENT ITEMS and REFERENCE FIELD

1. **Payment Items** are added to identify categories or items in a department's fee schedule (Property Tax, Vehicle Tax, Building

Permit, Utility Payment, Business License). The Payment Item Description will appear in the transaction detail and can be added as a column in the Detail Report.

2. The **Reference Field** is a unique identifier for the **Payment Item**, such as Account Number, Permit Number or Citation Number. It can be alpha-numeric and can be limited to the number of characters allowed. If no Reference Field requirements please enter "Not Applicable". The default will state Reference Number.

1. Payment Item Description *	2. Reference Field Description *
Constable Fees	Case Number
Convenience Fees	Case Number/ description
ADD MORE	ADD MORE

COMMENTS FIELD

An optional Comments Field can be added to each line item during the payment. This is helpful as an additional reference field or customer entered details and will appear in the transaction details and on the Detail Report. The default length is 100 characters.

Add Comments Field? *

Yes   ∨

Comments Field Length

100
Default is 100

PRIVATE LABEL

CertPay Consumer Web allows for custom branding of payment pages with a logo or graphic to match the look and feel of the agency's website. The image must be a **PNG file, 300x300** pixels or less. If you need help creating a PNG file, please contact your Sales Representative or Account Executive.

Add Private Label? *

No   ∨

Upload Logo/Graphic

Browse Files

Must be .png file, 300x300 pixels or less.

WEB PAYMENT ORIGINATION - If payments should always originate from your hosted site, please list the URL in "Other". Otherwise, choose www.certifiedpayments.net to allow customers to pay from our site as well.

○ http://www.certifiedpayments.net

◉ https://www.john

5. Integration and Data Management

Certified Payments REST API and GenericSTI payment interface are available for front and back end integration with agencies and their software partners. If you are interested in this functionality, please choose this as a Payment Channel option.

6. POS Equipment Deployment and Installation

Please complete the following information for counter payments. If EMV chip card readers are deployed, an administrative-level technical contact is required to complete installation.

# of Payment Stations

1

Payment Acceptance Hours

ex. 9-5 CST, M-F

# of Magtek USB Card Swipe Devices

1

# of Epson TM-T20II Receipt Printer

0

Purchase order and invoice will be sent separately

# of Ingenico IPP320 EMV PINPads

0

Purchase order and invoice will be sent separately

7. Bureau Banking Information

The undersigned authority authorizes Certified Payments to deposit ACH credits or initiate wire transfers for the payment of setlements due to and from the Agency

Bank Account for such purposes:

Bank Name

First Financial Bank

Bank Contact Name

Lisa Lemon

Bank Phone

(972) 723-7160

Bank Email

llemon@ffin.com

example@example.com

Bank Address

403 N Main

Street Address

Street Address Line 2

Cleburne

City

Texas

State

76033

Zip Code

Name as it appears on Agency Bank Account

Johnson County Treasurer ·

Date Bank Account Opened

03-29-1995

Approximate Date Opened

Bank Routing Number

Agency's Bank Account/DDA Number

Please upload a copy of a voided check or bank letter (must be on bank letterhead) on the above-referenced bank account. *

Browse Files

PDF or Image file

Bank Le...und.pdf   28.1KB

AGENCY'S ACCEPTANCE *

Date *

03-28-2022

Agency Signature

Clear

Name and Title *

Judge Roger Harmon, Johnson County Judge

CERTIFIED PAYMENTS' ACCEPTANCE

Date

Authorized Representative

Name and Title