**Third Party Vendor Qualification Application**

As outlined in Treasury policy [FIN 214](https://www.oregon.gov/treasury/public-financial-services/Documents/Public-Financial-Services-Cash-Management/FIN214.pdf), Vendors seeking qualification of services to collect, store, process, transmit, or otherwise provide certain Cash Management services on behalf of the Agency will need to be qualified by the Oregon State Treasury (Treasury) to provide the service(s). To initiate evaluation of potential Vendor qualification, please complete this application form, including Sections 1, 2, and 6 for all Vendors and Sections 3, 4, and/or 5 as applicable for the proposed services.

Completed applications, and any additional materials as might be appropriate, can be sent as provided below.

By mail to:

Oregon State Treasury

Attn: Third Party Vendor Qualification

867 Hawthorne Ave SE

Salem, OR 97301-5241

By e-mail to:

[customer.solutions@ost.state.or.us](file:///C:/Users/gonzalb/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/9Q7NFVYB/customer.solutions@ost.state.or.us)

If you have any questions regarding this form, please contact Customer Solutions at 503.373.7312.

**Section 1: VENDOR OVERVIEW & CONTACT INFORMATION**

Please provide the following Vendor information.

**Vendor and Point-of-Contact Information**

Vendor Name:

Vendor Address:

City/State/ZIP:

Contact Name:

Contact Title:

Contact Phone:

Contact E-mail:

**Vendor/Service Area Description**

Please provide a description of your company and/or the service area from which the service(s) will be delivered. Include years in operation, customer base (including whether company has current or previous experience serving governmental entities), etc. Please attach any marketing materials, doing-business-as names, website links, or other information as might be appropriate.

**Section 2: AGENCY/PROGRAM CONTACT INFORMATION**

Please provide the following Agency information.

**Agency and Point-of-Contact Information**

Agency Name:

Contact Name:

Contact Title:

Contact Phone:

Contact E-mail:

**Agency Program Description**

Please provide a name and/or very brief description of the Agency program for which the proposed services are intended (note “Agency-wide” if applicable).

**Section 3: AUTOMATED CLEARING HOUSE (ACH) SERVICES**

If proposing to provide ACH Services, please provide the following information and/or certifications.

**ACH Transaction Volumes**

Please identify the average number of ACH transactions processed (including time period over which average is calculated).

Transactions:

Time Period:

**ACH Transaction Storage, Processing, and Transmission**

Please select **one** of the following options and provide a brief description of the service provision.

**Vendor provides fully hosted ACH processing services. Data is collected, stored, processed and/or transmitted by the Vendor network.** Please provide a brief description of the services and means through which they are provided:

**Vendor provides other ACH processing services. Data is collected, stored, processed and/or transmitted by the Vendor network and may also be collected stored, processed and/or transmitted by Agency’s network.** Please provide a brief description of the services and means through which they are provided:

**Other** - Please provide a brief description of the services and means through which they are provided (this could include licenses or purchased software or hardware for use and/or installation by an agency; please check with Treasury regarding applicability):

**ACH Processing Flow Diagram**

Please submit a logical diagram of the ACH data environment consistent with the service provision type selected above. The diagram should identify all areas where ACH data is collected, stored, transmitted, and processed, and clearly illustrate:

* All hardware and software used to collect, store, process, or transmit sensitive ACH data;
* Who owns, maintains, and supports the hardware and software in the ACH Data Environment.

Initial diagrams will be used to assess compliance with State of Oregon requirements for ACH including any security, interface, depository, or public fund requirements. Agencies and Third Party Vendors should maintain the diagrams for ongoing ACH risk assessment purposes.

**State of Oregon Requirements for ACH Services**

Please certify **all** of the following statements.

Vendor agrees to provide services that are compliant with all applicable NACHA rules and regulations.

Vendor has been provided a copy of Treasury policies, procedures, or system requirements applicable to the proposed Cash Management services, including policies relative to security, interface, or depository requirements, and agrees to comply with the provisions of applicable requirements.

Vendor services provided will comply with the provisions of [ORS 293.265](https://www.oregonlegislature.gov/bills_laws/ors/ors293.html), which generally requires timely deposit of Money(s) into a State Treasury account not later than one business day after receipt or collection. This requirement is typically met by using an OST issued ACH Company ID and Name and further posting concurrently to the Agency’s and Receiver’s bank accounts on the effective settlement date of the transaction. Vendor’s ACH processing flow diagram should further demonstrate compliance with this requirement.

Vendor will comply with the provisions of [ORS chapter 295](https://www.oregonlegislature.gov/bills_laws/ors/ors295.html) regarding Oregon depository requirements, including the requirement for public funds to be held in a qualified public funds depository. This requirement is typically met by using an OST issued ACH Company ID and Name and further posting concurrently to the Agency’s and Receiver’s bank accounts on the effective settlement date of the transaction. Vendor’s ACH processing flow diagram should further demonstrate compliance with this requirement.

Vendor will comply with the provisions of [ORS 646A.600 to 646A.628](https://www.oregonlegislature.gov/bills_laws/ors/ors646A.html) regarding the Oregon Consumer Identity Theft Protection Act.

Vendor will invoice Agency for all fees associated with the Cash Management services the Vendor provides an Agency, as Treasury does not allow any organization to debit Agency bank accounts via ACH.

**Section 4: MERCHANT CARD ACCEPTANCE SERVICES**

If proposing to provide Merchant Card Acceptance Services, please provide the following information and/or certifications.

**Debit/Credit Card Transaction Volumes**

Please identify the average number of merchant card transactions processed (including time period over which average is calculated).

Transactions:

Time Period:

Select **one** applicable service provider level as defined by Visa:

**Level 1**: VisaNet processors or any service provider that stores, processes and/or transmits over 300,000 transactions per year.

**Level 2**: Any service provider that stores, processes and/or transmits fewer than 300,000 transactions per year.

**Merchant Card Transaction Storage, Processing, and Transmission**

Please select **one** of the following options and provide a brief description of the service provision.

**Vendor provides fully hosted Merchant Card processing services. Data is collected, stored, processed and/ or transmitted by the Vendor network.** Please provide a brief description of the services and means through which they are provided:

**Vendor provides other Merchant Card processing services. Data is collected, stored, processed and/or transmitted by the Vendor network and may also be collected, stored, processed and/or transmitted by Agency’s network.** Please provide a brief description of the services and means through which they are provided:

**Other** - Please provide a brief description of the services and means through which they are provided (this could include licenses or purchased software or hardware for use and/or installation by an agency; please check with Treasury regarding applicability):

**Payment Card Industry (PCI) Data Security Standards**

Please select **one** of the following options.

Vendor is listed as a PCI Compliant Service Provider on Visa’s Global Registry of Service Providers list and/or MasterCard PCI Compliant Service Providers list under the following name:

Please submit a signed copy of the related Attestation of Compliance (AOC).

Vendor has completed a PCI Data Security Assessment validating compliance with PCI Data Security Standards, which is currently under review by Visa and/or MasterCard. For verification purposes, please provide the following information:

Qualified Data Security Company:

Primary Contact Name:

Primary Contact E-mail:

Primary Contact Number:

Please submit a signed copy of the related Attestation of Compliance (AOC).

Vendor has completed a PCI Self-Assessment Questionnaire D and Network Scan validating compliance with PCI Data Security Standards. For verification purposes, please provide a copy of the SAQ D Attestation of Compliance (AOC) and the executive summary portion of your latest clean scan report evidencing compliance.

**Merchant Card Acceptance Processing Flow Diagram**

Please submit a logical diagram of the cardholder data environment (CDE) consistent with the service provision type selected above. The diagram should identify all areas where cardholder data is collected, stored, transmitted, and processed, and clearly illustrate:

* All hardware and software used to collect, store, process, or transmit sensitive cardholder data;
* Who owns, maintains, and supports the hardware and software in the CDE.

Initial diagrams will be used to assess compliance with PCI DSS and State of Oregon requirements including any security, interface, depository, or public fund requirements. Agencies and Third Party Vendors should maintain the diagrams for ongoing PCI DSS compliance purposes.

**State of Oregon Requirements for Merchant Card Acceptance Services**

Please certify **all** of the following statements.

Vendor agrees to provide services that are compliant with all applicable Payment Card Industry Data Security Standards (PCI DSS).

Vendor is Elavon and/or TSYS Certified ***OR*** Vendor uses the following PCI-compliant gateway to process through Elavon and/or TSYS:

Services provided will comply with the provisions of applicable Industry Standards and Regulations as provided in the Terms and Conditions of the State’s Master Merchant Card Services Agreement.

Vendor has been provided a copy of Treasury policies, procedures, or system requirements applicable to the proposed Cash Management services, including policies relative to security, interface, or depository requirements, and agrees to comply with the provisions of applicable requirements.

Services provided will comply with the provisions of [ORS 293.265](https://www.oregonlegislature.gov/bills_laws/ors/ors293.html), which generally requires timely deposit of Money(s) into a State Treasury account not later than one business day after receipt or collection. This requirement is typically met by using a Merchant ID issued by the State’s Merchant Card Services Provider and depositing merchant card funds directly into a state account when they are settled after end-of-day processing.

Vendor will comply with the provisions of [ORS chapter 295](https://www.oregonlegislature.gov/bills_laws/ors/ors295.html) regarding Oregon depository requirements, including the requirement for public funds to be held in a qualified public funds depository. This requirement is typically met by using a Merchant ID issued by the State’s Merchant Card Services Provider and depositing merchant card funds directly into a state account when they are settled after end-of-day processing

Vendor agrees to cooperate with Agency to provide Treasury with annual updates regarding continued PCI compliance.

Vendor will comply with the provisions of [ORS 646A.600 to 646A.628](https://www.oregonlegislature.gov/bills_laws/ors/ors646A.html) regarding the Oregon Consumer Identity Theft Protection Act.

Vendor will invoice Agency for all fees associated with the Cash Management services the Vendor provides an Agency, as Treasury does not allow any organization to debit Agency bank accounts via ACH.

**Section 5: OTHER CASH MANAGEMENT SERVICES**

If proposing to provide Cash Management services other than ACH or Merchant Card Acceptance Services, please clearly identify the proposed service to be provided by the Vendor.

Treasury will use this information to identify what additional information will be required from the Vendor or Agency to complete the qualification process for each distinct proposed solution. Please note that additional information will need to address the following at a minimum:

* Certification to compliance with relevant Industry Standards or Regulations.
* Certification to compliance with any relevant Treasury policies, procedures, or system requirements applicable to the proposed Cash Management services.
* Certification to compliance with Oregon Public Funds Laws.
* Certification to compliance with the provisions of the Oregon Consumer Identity Theft Protection Act.
* A process flow diagram.

**Section 6: CERTIFICATION**

You certify that your answers are complete and correct to the best of your knowledge, you have not deceived or attempted to deceive the examiners of this application, and are confident the answers you provided accurately reflect your organization’s actual practices, policies, and procedures.

Name:

Title:

Date: