

FULL SCOPE POS

Dealer setup inquiry | print, handwritten, and email

Complete this form by hand and email clear scans or photos to support@fullscopepos.com. Copy page 3 for each API connection you want us to set up. We will confirm availability before sending an order form or collecting a setup fee.

1 Business and primary contact

Legal business name

Doing-business-as name (if different)

Business phone

Physical business address (street, city, state, ZIP)

Mailing address (if different)

Primary owner/contact name

Best phone / text number

Contact email address

Business type

☐ Firearm retailer / FFL ☐ Other retailer ☐ New business ☐ Existing business

FFL type (if applicable)

FFL expiration month/year (if applicable)

2 Service requested

Package of interest

☐ Retail Core ☐ Online Store ☐ Dealer Operations ☐ Full Scope Complete ☐ Not sure

Number of business locations

Expected simultaneous checkout stations

Customer website

☐ New website needed ☐ Existing site to discuss ☐ No website needed

Current website/domain, if any

Package selection and any hardware purchases are finalized on a separate written order form. This sheet does not create an account or authorize a charge.

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3 Existing systems and connections

Current POS / inventory system (if any)

Approximate number of inventory items

Inventory migration requested?

☐ Yes ☐ No ☐ Need to discuss

Supplier connections used or requested

☐ Chattanooga ☐ Davidson's ☐ Lipsey's ☐ MGE ☐ Orion ☐ RSR ☐ Rothco ☐ Other

Other suppliers / account representative (names only)

FastBound

☐ Already have an account ☐ Plan to open an account ☐ Not needed ☐ Need to discuss

Dealer's own online payment provider

☐ Authorize.Net ☐ Other ☐ Not needed ☐ Need to discuss

Provider names or special setup needs (enter API details on page 3)

4 Equipment and scheduling

Equipment to discuss

☐ Windows POS ☐ Receipt printer ☐ Cash drawer ☐ Label printer ☐ Scanner ☐ Tablet

Preferred setup start date

Best days/times to contact you

Anything else we should know?

Additional notes

Submitting the form

Email the completed pages to support@fullscopepos.com. Use page 3 for the API credentials needed for your chosen connections, and make additional copies for multiple providers. Do not include banking or card details, customer records, or identification documents.

Email the completed form to: support@fullscopepos.com

Suggested subject: Full Scope POS setup inquiry - [business name]

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5 API and service connection details - copy this page per provider

Use one copy of this page for each supplier, FastBound, payment gateway, or other connection. Write characters clearly, including uppercase/lowercase, hyphens, zeros, and letter O's.

Dealer business name

Provider / service name

Connection type

☐ Supplier catalog ☐ FastBound ☐ Payment gateway ☐ Other

Environment

☐ Live / production ☐ Test / sandbox ☐ Not sure

Account ID / merchant ID / FastBound account ID (if applicable)

API key / client ID / API login ID - first line

API key / client ID / API login ID - continuation if needed

API secret / access token / transaction key - first line

API secret / access token / transaction key - continuation if needed

Webhook signature key / additional connection key (if applicable)

Additional key continuation or special setup details

Sending credential pages

Email a clear scan or photo of this completed page to support@fullscopepos.com with the rest of your form. Provide only the API credentials for services you want Full Scope to connect. Do not write your general website login password, card data, bank details, or customer records here.