



Clark County Prosecuting Attorney's Check Enforcement Program

1013 Franklin • Vancouver, WA • 98660

Merchant Registration

The Clark County Prosecuting Attorney's Check Enforcement Program requires that victims register with our office. This information helps speed up processing of checks and helps assure the prompt and accurate transmittal of recovered funds. Please take a few minutes to complete the form below so that we can update our records. **Thank you for your help.**

Business or Individual Information – Please include company name as well as the division or store name that applies to your particular location. Include a contact person's name and phone number. If more than one person is responsible for bad checks in your organization, include that person's name also.

NOTE: This information is to be used only by the Prosecuting Attorney's Office and its agents for the purpose of managing bad checks that have been turned over to their office.

1. Business or Individual Information

Business or Individual's name _____

Division, store number or location (if applicable) _____

Address _____

City _____ State _____ Zip Code _____

Primary contact _____

Phone _____ FAX _____

Number of cash registers for which you will need Notification Signs _____

Approximate number of bad checks you receive each year _____

The Check Enforcement Program will collect a Victim's Service Fee. Please indicate the actual amount that your bank charges you for each returned check. _____

If several business locations are involved, please fill out this form for each of them.

2. Many companies work through a central office. If that is true for you, please include this information. Special handling requests should also be included. We will do our best to comply, but we cannot guarantee all requests can be honored.

Central Location Information

Location Name _____

Primary Contact _____

Address _____

City _____ ST _____ Zip _____

Phone _____ FAX _____

3. Send the following to Central Location address:

____ **Victim Confirmation** - Acknowledging receipt of bad checks for handling.

____ **Restitution** - Restitution checks and confirmation letters.

____ **Finalization Notice** - Notices of checks being returned as uncollectible, cases resolved or otherwise finalized.

____ **Other** - Miscellaneous communications.
Specify: _____

4. Special Handling Requests: _____

Merchant's Agreement

Any merchant or individual who receives an “**Insufficient Funds**,” “**No Account**” or “**Account Closed**” check may use the Prosecuting Attorney’s Check Enforcement Program. The Program is completely funded by the check offenders.

The following outlines the merchant’s or individual’s responsibility in handling bad checks through the Check Enforcement Program:

- 1) The Clark County Prosecuting Attorney’s Check Enforcement Program is a Diversion Program which offers the check writer a chance to pay the checks and fees instead of being prosecuted.
- 2) If a check is not honored by the bank, you must contact the check writer by phone or mail (and submit the check a second time through the bank for non-sufficient funds (NSF) check).
- 3) Check writers must be allowed 10 days to comply by paying the full amount of the dishonored check plus a service fee. If the check writer fails to comply within the allowed 10 day period, you may immediately turn the check - and any supporting information - over to the Check Enforcement Program.
- 4) To refer a check to the Check Enforcement Program, you must fill in the Check Complaint Form and attach it to the original check and forward it within 90 days of receiving the check to:

Clark County Prosecuting Attorney’s
Check Enforcement Program
1013 Franklin Street
Vancouver, WA 98660

- 5) Once a check has been turned over to the Check Enforcement Program, you cannot accept payment or restitution on the bad check directly from the offender. Restitution and appropriate fees can only be paid to the Check Enforcement Program. The offender who wishes to pay on a check which has been sent to the Program should be directed to call 1-888-505-9672.
- 6) Failure to abide by this agreement may result in the discontinuance of a merchant’s or individual’s participation in the Check Enforcement Program.
- 7) This agreement may be amended from time to time by the Prosecuting Attorney and such amendments will be effective upon mailing of a notice to the undersigned party.
- 8) Direct all inquires about the check(s) that you submit to the Check Enforcement Program – call 1-888-505-9672 or write to the address indicated below.

The undersigned acknowledges that the Clark County Prosecuting Attorney’s Check Enforcement Program is a voluntary program provided by the Clark County Prosecuting Attorney’s Office. No liability is assumed by the above parties in connection with this program nor are said parties guaranteeing the payment of restitution in any amounts by the offender. The only remedy will be to request return of the check from the program.

NAME: _____

DATE: _____

SIGNATURE: _____

Retain a copy of this agreement and return the original to:

Clark County Prosecuting Attorney’s
Check Enforcement Program
1013 Franklin Street
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On the World Wide Web
If you need additional forms or would like more information
regarding the Check Enforcement Program, visit:
hotchecks.net/clark