

Merchant PCI Compliance Programme POS Terminal Inspection Form

Merchant Name:	Make:
Merchant #:	Model #:
TID:	Pin Pad S/N:
Serial #:	Location:

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Kindly tick the appropriate answer to the questions below:												
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC
REQUIREMENTS	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N
Is the terminal in its usual location?												
Has the color and general description changed since the last review?												
Do you see any wires or other "object" showing from card swipe area?												
Is the number of connections to the terminal the same as the last review?												
Is there any rouge devices (skimming devices) attached to the POS or pin pads?												
Does the POS device have the Tamper Prevention Seal (found on the underside of the terminal)?												
Is there any physical damage to the terminal (e.g. breakage of the external shell, exposed wires etc.)?												
Are CCTV cameras installed in the area of the POS Terminal?												

Indicate the total number of terminals at your location

Name: ____

(Print Name)

Signature: ____

Date of Inspection: mm / dd / yyyy

NOTE: This document is just one of many tools intended to support you in your PCI compliance validation efforts. Pictures of all POS Terminal Models are located on our website at www.JNCB.com.

POS Terminal Inspection Form.indd 1

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