Tam	per Prevention	Inspections for	Payment	Card '	Terminals or	Processing	Device	(perform o	(uarterly
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Department:				
Staff Member Performing Inspection(s):				
Staff Member's Signature and Date of Inspec	ction			

- A. All terminals and devices should be inspected quarterly and records maintained for internal and external auditors. This includes devices attached to an iOS phone or tablet.
- B. **Terminals with separate pin pads must be inspected as though they were two separate terminals**. (describe the base station in the Terminal 1 column and the pin pad in the Terminal2 column)

	station in the Terminal 1 column and the pin pad in the Terminal2 column	1)				
	TERMINAL or DEVICE DESCRIPTION	TERMINAL	or DEVICE 1	TERMINA	L or DEVICE 2	
1. Se	rial number	1		1		
2. M	ake & model	2		2		
3. Lo	ocation of terminal or device	3.		3		
4. Co	olor, size, condition & markings	4		4		
5. Se	Security seals			5		
6. Co	Cords – Color, number, & condition			6		
7. N	umber of connections or ports	7		7		
8. M	anufacturer's security markings	8		8		
9. De	escribe device(s) attached or near the terminal	9		9		
10. Condition of ceiling (looking for potential camera installations designed to record payment card numbers and		10		10		
piı	n# during transactions) umber of Cameras (if applicable)	11		11		
11. 140	uniber of Cameras (if applicable)					
		Yes	No	Yes	No	
1. Is th	e serial number correct on the label and the screen?					
2. Are	the terminal/device manufacturer's Make and Model correct?					
3. Is th	e terminal or device in its usual location?					
device	the color, size, and general condition of the terminal or as described, with no additional marks or scratches ally around the seams)?					
5. Are	the manufacturer's security seals and labels intact?					
	the cords/cables to the terminal/device as described using the ype and color of cables, with no loose or broken connections?					
	nt the number of connections or ports to the terminal or device. his agree with the number stated?					
8. Are describ	the manufacturer's security markings and reference numbers as ped?					
	all devices near or attached to the terminal or device as bed and no new devices such as a skimmer?					
	he condition of the ceiling above the terminal the same as bed with no new marks, holes or fingerprints?					
11. If s	surveillance cameras are used, is the total number the same?					
12. Ha	s the total number of terminals or devices changed?					
	ve any personnel or third party requested access to shoot, upgrade or change the terminal or device?					
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