

PCI Compliance Acceptance Form

**Credit Card Payment Compliance Acceptance Form**

Department / Division name: **SoA**

All State of Alaska departmental divisions or subsections thereof, when choosing to accept credit card payments, are required to comply with the Payment Card Industry Data Security Standards (PCI-DSS) available at: [https://www.pcisecuritystandards.org/security\\_standards/documents.php](https://www.pcisecuritystandards.org/security_standards/documents.php).

The PCI-DSS requirements can be lessened depending upon which credit card acceptance method is chosen, but as long as credit card payments are accepted, the relevant PCI-DSS compliance requirements must be met.

This certification is valid for one year and must be recertified annually.

**By signing below, I understand and accept that by accepting Credit Card payments, PCI-DSS compliance must be achieved for our Division/Department.**

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Printed Name of System Owner  
(Division Director)*

\_\_\_\_\_ *Signature*

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Printed Name of IT Manager*

\_\_\_\_\_ *Signature*

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Printed Name of Security Officer*

\_\_\_\_\_ *Signature*

**All three signatures above are required for authorization to production. If one or more signatures are missing, the Department Commissioner or Designee can authorize the system/application to be deployed to production on their signature alone.**

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Printed Name of Agency Head  
Commissioner*

\_\_\_\_\_ *Signature*