



eCommerce Department  
 53 Industrial Cir, Lancaster, PA 17601  
 Local: 717.656.4121  
 Toll Free: 800.233.0210  
 Email: [ecommerce@pennvet.com](mailto:ecommerce@pennvet.com)

Internal Use	
TR	IR
CL	TC
Acct	

# ONLINE PAYMENT CENTER ACCESS FORM

➤ Set up access for online payment center

Please supply the below information to grant access to the online payment center for the listed username(s).

Penn Vet Account Number		Account Name	
Practice Owner			
Username 1		Username 2	
Username 3		Username 4	
Signature of Practice Owner			

**PLEASE RETURN COMPLETED FORM TO PENN VETERINARY SUPPLY**

 <a href="mailto:ecommerce@pennvet.com">ecommerce@pennvet.com</a>	 717.327.4373	 P.O. BOX 10877, LANCASTER, PA 17605-0877
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