

Attached Required Document Checklist		Date	Fax to : 901-692-9499	
Voided Check ☐		Submitted: 9-15-22	email to: applications@impactpays.net	
Business Verification Document ☐				
Copy of Drivers License ☐				
Version: 005				
Merchant Application Submission Form				
Merchant (Business) DBA Name:				
Business Legal Name: Joe's Pizza of Pinckneyville Inc				
Contact Name: Angel Osorio		Contact Phone Number: 618-704-4185		
Physical Address: 112 W Water St.		City, State, Zip: Pinckneyville, IL, 62274		
Phone Number: 618-357-8080		Fax Number:		
Email Address: joespizzaosorio@gmail.com		Website: orderjoes.com		
Billing Address: 112 W Water Street		City: Pinckneyville		
State: IL		Zip: 62274		
Business Type				
Corporation - circle one: Private or Public		Business Start Date: 08-16-2016		
LLC - circle one: C corp S corp P partner D disregarded entity		Refund Policy: 30 days 60 days Other None		
Sole Prop Other:		EIN/Federal Tax ID# 81 - 3360958	Print Refund Policy on Footer: Yes No	
Partnership		Types of Goods Sold: Food & Beverages	(If yes input message in notes)	
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form				
Officer/Owners Name: Angel Osorio		Title: President	Social Security: 718257919	
Home Address: 741 Torrens Street		City, State, Zip Code: Tilden, IL, 62292		
Drivers License#: O260-0149-1311		Expiration Date: 11-01-25	State: IL	
DOB: 11-01-1991		Home Phone Number: 6187044185		
% of Business Owned: 33.33 %		Length of Ownership: 6+ years		
Banking Information ** No starter checks or deposit slips accepted**		Terminal Questions (Circle your answer)		
Name of Bank First National Bank of Pinckneyville		Batch Out Time:		
ABA Routing # 081905344		Communication Method: IP-internet or Dial-phone		
Account # 4043582		Do you dial 9 for outside line? Yes No		
Estimated Sales Volume		Terminal Type:		
Estimated Annual Sales (All sales) \$750,000		Reprogram Terminal: Yes No		
Estimated Visa/MC/Discover Sales \$		Equipment Purchase: Yes No		
Estimated Monthly Visa/MC/Discover/ AMEX Sales \$		Equipment Rental Program: Yes No		
Average Ticket \$		Next Day Funding: Yes No		
High Ticket \$		Tip Edit: Yes No		
First two sections must equal 100% respectively		EBT: Yes No FNS Number:		
Card Swiped: %	Card Keyed In: %	% = 100%		
Card Present: %	Card Not Present %	% = 100%		
MOTO: %	Internet: %			
Traditional	IBUXX	SimpleBuxx PrimeBuxx		
Notes:		MP/AP Name:		
		RP Name:		
		Pricing Provided: Statement Analysis or Quote		
Receipt Header Message:				
Receipt Footer Message:				