Attached Paguired Document Charletet	Fax to : 901-692	0400	
Attached Required Document Checklist Voided Check	Fax to: 901-692	-9499	
Business Verification Document		email to: applications@impactpays.net	
Copy of Drivers License	applicatio		
Managing Partner Name: David Copeland	applications of impactipations of information in the information of the information in th		
Date Submitted: 5/20/21			-
Merchant Application Submission Form			
Merchant (Business) DBA Name: Fish Island			
Business Legal Name: Fish Island Outfitters LLC			
ontact Name: Contact Phone Number:			
Physical Address: 3535 Blue Springs Rd	City, State, Zip: Cadiz, KY 42211		
Phone Number: 270-924-0780 Fax Number:			
Email Address:	Website:		
Billing Address:	City:		
State: Zip:			
Business Type			
Corporation - circle one: Private or Public		Business Start Date:	
LLC - circle one: C corp S corp P partner D di	sregarded entity		_
Sole Prop Other: EIN/F	ederal Tax ID# 85-37369	13	Refund Policy? Yes or No
☐ Partnership Types	s of Goods Sold:		
Ownership Information (Must be 51% or more) *Might need information on all owners*			
Officer/Owners Name: Tony & Jayson	Title: Owner	Social Security:	T:404-23-6594 J:402-29-6029
Home Address: City, State, Zip Code:			
Drivers License#:	Expiration Date: State:		
DOB:	Home Phone Number: T:J:		
of Business Owned: 50/50 % Length of Ownership:			
Banking Information			
A copy of a voided check or a signed verification letter from the bank is required. *No Starter Checks Accepted*			
Name of Bank			
ABA Routing #			
Account # Estimated Sales Volume		Tormi	nal Questions
Estimated Annual Sales (All sales)	¢	Batch Out Time:	iai Questions
Estimated Annual Visa/MC/Discover/ AMEX Sales	\$ \$ \$		P-internet Dial-phone WIFI
Estimated Monthly Visa/MC/Discover/ AMEX Sales	\$	Do you dial 9 for outside lir	
Average Ticket	\$	Terminal Type:	
High Ticket	\$	Pin Pad Type:	
First two sections must equal 100% respectively		Reprogram Terminal:	Yes - No
Card Swiped: % Card Keyed In: % = 1	100%	Equipment Purchase:	Yes - No
Card Present: % Card Not Present % =1	00%	Equipment Rental Program	m: Yes - No
MOTO: % Internet: %		PIN Debit Pin Pad:	Yes - No
IBUXX or Traditional		POS Software Integration:	Yes - No
Notes:		Software Name & Version	:
		Next Day Funding:	Yes - No
		Tip Edit:	Yes - No
			Version: 004