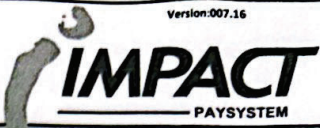


Attached Required Document Checklist		Date	Fax to : 901-692-9499		Version: 007.16		
Voided Check	☒	Submitted:	email to:				
Business Verification Document	☒		applications@impactpays.net				
Copy of Drivers License	☒						
Merchant Application Submission Form							
Merchant (Business) DBA Name:		Strokin Sniper Shop					
Business Legal Name:		Strokin Sniper Shop			Website:		
Contact Name:		Dylan Edgil		Contact Phone Number:		205-616-2022	
Physical Address:		2500 2nd Ave East		City, State, Zip:		Oneonta, AL 35121	
Email Address:		Blazemoto2@yahoo.com			Phone #:		205-616-2022
Billing Address:		2500 2nd Ave East		City, State, Zip:		Oneonta, AL 35121	
Biz Phone #:		205-616-2022		Biz Fax #:		85-1409539	
Business Type							
Corporation - Pick One:		LLC		Type:		Bus Open Date: 2020	
Refund Policy:				Print Policy:		(If yes input refund message)	
Types of Goods Sold:							
Convenience Store							
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form							
Officer/Owners Name:		Dylan Edgil		Title:		OWNER	
Home Address:		2500 2nd Ave E		City, State, Zip Code:		Oneonta, AL 35121	
Drivers License#:		6682062		Exp Date:		11-4-2024	
DOB:		4-6-1981		Home Phone#:		205-616-2022	
% of Business Owned:		100%		Length of Ownership:		4 years	
Banking Information ** No starter checks or deposit slips accepted**							
Name of Bank:		Hometown Bank		Batch Out Time (for nextday funding 7:00 PM): 7:00pm			
ABA Routing #:		001666		Communication Method:			
Account #:		062206444		Do you dial 9 for outside line? -			
Estimated Sales Volume				Terminal Questions (Circle your answer)			
Estimated Annual Sales (All sales)		\$ 5000.00		Terminal Type:			
Estimated Visa/MC/Discover Sales		\$		Reprogram Terminal:			
Estimated Monthly Visa/MC/Discover/ AMEX Sales		\$		Equipment Purchase:			
Average Ticket		\$ 500.00		Equip. Rental Program:			
High Ticket		\$ 1500.00		Next Day Funding:			
First two sections must equal 100% respectively				Tip Edit:			
Card Swiped: 99 %		Card Keyed In: 1 % = 100% 0		EBT:		FNS Number:	
Card Present: %		Card Not Present % = 100% 0		Tax Calculation:			
MOTO: %		Internet: %		If so tax rate:			
Program Type:				Software or POS Integration Questions Only			
Notes: Rev up \$14.95/6months \$25.95 after				POS Software Integration:			
				Software Name & Version:			
				MP/AP Name: Holley Shirley			
				RP Name: Jennifer Sligh			
				Pricing Provided:			
Receipt Header Message:							
Receipt Footer Message:							