Attached Required Document Checklist		Fax to : 901-692-9499	IMPACT PAYMENT PARTNERS
Voided Check ☒		email to: applications@impactpays.net	
Copy of Drivers License ☒			
Managing Partner Name: Jason + Lisa			
Date Submitted: 9-3-20			

Merchant Application Submission Form

Merchant (Business) DBA Name: Mountain View Music

Business Legal Name: Mountain View Music

Contact Name: Cheryl Pool — Contact Phone Number: 870-269-9044

Physical Address: 123 West Washington — City, State, Zip: Mtn. View, AR 72560

Phone Number: 870-269-9044 — Fax Number:

Email Address: Mountainviewmusic@gmail.com — Website: mountainviewmusic.com

Billing Address: PO Box 929 — City:

State: Mtn. View, AR — Zip: 72560

Business Type

☐ Corporation - circle one: Private or Public

☐ LLC - circle one: C corp S corp P partner D disregarded entity

☒ Sole Prop ☐ Other:

☐ Partnership

Business Start Date: 2006 3-14-06

Federal Tax ID# 20-4544355

Refund Policy? Yes or ~~No~~

Types of Goods Sold: music lessons, guitar builds, repair

Ownership Information (Must be 51% or more)

Officer/Owners Name: Cheryl Pool — Title: owner — Social Security: 267-69-2512

Home Address: 308 West Washington — City, State, Zip Code: Mtn View, AR 72560

Drivers License#: 905056624 — Expiration Date: 2-4-25 — State: AR

DOB: 2-4-1963 — Home Phone Number:

% of Business Owned: 100 % — Length of Ownership: 14 years

Banking Information

☐ Bank Reference (a copy of a voided check or a DDA verification letter from the bank is required)

Name of Bank First Security Bank

ABA Routing # 082901538

Account # 20068 502 6

Estimated Sales Volume

Estimated Annual Sales (All sales)	$150,000
Estimated Visa/MC/Discover Sales	$100,000
Estimated Monthly Visa/MC/Discover/ AMEX Sales	$10000
Average Ticket	$20.00
High Ticket	$2,500

First two sections must equal 100% respectively

Card Swiped: 98% % Card Keyed In: 2% % = 100%

Card Present: 98% % Card Not Present 2% % =100%

MOTO: % Internet: %

Notes:

Rent Verifone VX520

Terminal Questions

Batch Out Time: 7:00pm	
Communication Method: ☒ Internet or Dial-phone	
Do you dial 9 for outside line? ☐ Yes - ☒ No	
Terminal Type:	
Pin Pad Type:	
Reprogram Terminal:	☐ Yes - ☒ No
Equipment Purchase:	☐ Yes - ☒ No
Equipment Rental Program:	☒ Yes - ☐ No
PIN Debit Pin Pad:	☐ Yes - ☒ No
POS Software Integration:	☐ Yes - ☒ No
Software Name & Version:	
Next Day Funding:	☒ Yes - ☐ No
Tip Edit:	☐ Yes - ☒ No

Version: 003

MOUNTAIN VIEW MUSIC
P O BOX 929 PH. 870-269-9044
MOUNTAIN VIEW, AR 72560

5615

81-153/829

Date

CHECK ARMOR FRAUD PROTECTION

PAY to the order of _____ $

_____ Dollars

Photo Safe Deposit® Details on back

FirstSecurity Bank

For _____

MP

⑈082901538⑈5615 20068⑈5026⑈

Employer ID 20-4544355

State of Arkansas

SALES AND USE TAX PERMIT

MOUNTAIN VIEW MUSIC & GFTS INC
123 WEST WASHINGTON
MOUNTAIN VIEW AR 72560

DATE ISSUED: 06/20/2006

PERMIT NUMBER: 296655-69-001

DLN: 2980 04 2006 05150 16

DATE OPENED: 03/14/2006

OWNER1: ROBERT S POOL
OWNER2: CHERYL L POOL
OWNER3:
OWNER4:

12-54

NAICS: 45122
Prerecorded Tape, Compact Disc, and Record Stores

THIS BUSINESS IS EXEMPT FROM SALES TAX ONLY FOR THE PURCHASES OF GOODS TO BE RESOLD IN THE NORMAL COURSE OF BUSINESS.

THIS PERMIT IS VALID UNTIL IT IS CANCELED AND SURRENDERED BY THE PERMIT HOLDER OR REVOKED BY THE COMMISSIONER OF REVENUES.

THIS PERMIT MUST BE SURRENDERED IF BUSINESS IS SOLD, DISCONTINUED OR LOCATION CHANGED.

WHEN THIS PERMIT IS SURRENDERED FOR ANY OF THE ABOVE REASONS, YOU MUST REPORT AND PAY ANY SALES OR USE TAX PLUS ANY PENALTIES OR INTEREST THAT IS OWED BY THIS BUSINESS. FAILURE TO PAY THESE TAXES WILL RESULT IN A LIEN BEING PLACED AGAINST THE STOCK AND FIXTURES OF THIS BUSINESS AND IS ENFORCEABLE AGAINST PURCHASERS AND THIRD PARTIES.

** PERMIT MUST BE DISPLAYED IN A PROMINENT PLACE IN YOUR BUSINESS **

ARKANSAS DRIVER'S LICENSE NOT FOR FEDERAL ID

4d DLN 906056624

CLASS D

1 POOL

2 CHERYL LYNNE

8 308 W WASHINGTON ST
MOUNTAIN VIEW, AR 72560-8019

4a ISS 08/14/2020

4b EXP 02/04/2028

15 SEX F

16 HGT 5'-08"

18 EYES BLU

9a END NONE

12 RESTR NONE

5 DD 822104576 6901

DUPLICATE

DONOR

Cheryl Lynne Pool