


Attached Required Document Checklist		Date Submitted:	Fax to: 901-692-9499	 Version: 005
Voided Check	<input checked="" type="checkbox"/>	email to: applications@impactpays.net		
Business Verification Document	<input checked="" type="checkbox"/>			
Copy of Drivers License	<input type="checkbox"/>			
Merchant Application Submission Form				
Merchant (Business) DBA Name: Mr. Charles Food and Fuel				
Business Legal Name: Marks Investment LLC				
Contact Name: Rose Sultan		Contact Phone Number: 901-691-7504		
Physical Address: 5245 Hwy 57		City, State, Zip: Rossville, TN 38066		
Phone Number: 901-861-2235		Fax Number:		
Email Address: Rose.shah.2022@gmail.com		Website:		
Billing Address: Same		City:		
State:		Zip:		
Business Type				
Corporation - circle one: Private or Public		Business Start Date: 2000 <i>Purchased 10/22</i>		
LLC - circle one: C corp S corp P partner D disregarded entity		Refund Policy: 30 days 60 days Other <u>None</u>		
Sole Prop Other:		EIN/Federal Tax ID# 861214968	Print Refund Policy on Footer: Yes No	
Partnership		Types of Goods Sold: Convenience, GRS	If yes input message in notes)	
Ownership Information (Must be 51% or more) If multiple owners fill out additional ownership form				
Officer/Owners Name: Razia Sultana		Title: owner	Social Security: 848 27 6698	
Home Address: 211 Nonannah Dr		City, State, Zip Code: Buhl, MS 38		
Drivers License#: 637469775		Expiration Date: 8-18-25	State: ms	
DOB: 3-1-75		Home Phone Number: 901-691-7504		
% of Business Owned: 100 %		Length of Ownership: 4 months		
Banking Information ** No starter checks or deposit slips accepted**		Terminal Questions (Circle your answer)		
Name of Bank: Trustmark		Batch Out Time: latest possible for next day		
ABA Routing #: 065300279		Communication Method: IP-internet or Dial-phone		
Account #: 6700008482		Do you dial 9 for outside line? Yes <u>No</u>		
Estimated Sales Volume		Terminal Type: <u>IP</u>		
Estimated Annual Sales (All sales) \$600K		Reprogram Terminal: Yes No		
Estimated Visa/MC/Discover Sales \$400K		Equipment Purchase: Yes No		
Estimated Monthly Visa/MC/Discover/AMEX Sales \$35K		Equipment Rental Program: Yes No		
Average Ticket \$18.40		Next Day Funding: <u>Yes</u> No		
High Ticket \$150		Tip Edit: Yes <u>No</u>		
First two sections must equal 100% respectively		EBT: Yes No FNS Number: not yet		
Card Swiped: 99 % Card Keyed In: 1 % = 100%		Tax Calculation: Yes No If so tax rate: %		
Card Present: 100 % Card Not Present 0 % = 100%		Software or POS Integration Questions Only		
MOTO: % Internet: %		POS Software Integration: Yes No		
Traditional <u>IBUXX</u> SimpleBuxx PrimeBuxx		Software Name & Version:		
Notes: 1995 39590		MP/AP Name:		
		RP Name:		
		Pricing Provided: Statement Analysis or Quote		
Receipt Header Message:				
Receipt Footer Message:				