

Attached Document Checklist

Voided Check

Copy of Drivers License

Fax to : 901-692-9499
 email to:
 applications@impactpays.net



Merchant Application Submission Form

Merchant (Business) DBA Name: CONNELL Body Shop

Business Legal Name:

Contact Name: TRACY CONATSER Contact Phone Number: 731-

Physical Address: 239 Cleveland St. City, State, Zip: Ripley, TN 38063

Phone Number: 731-635-2292 Fax Number: 731-635-1268

Email Address: Shop7783@Bellsouth.NET Website:

Billing Address: Same City:

State: Zip:

Corporation Limited Liability Sole Prop Partnership

Business Start Date: 1961

Business Type: Body Repair Shop

% of Business Owned: 51 % Length of Ownership: 19

Other Types of Goods Sold: Body Shop

Federal Tax ID# 62-1813846 Refund Policy?

Ownership Information

Officer/Owners Name: KEVIN CONNELL Title: owner Social Security: 414841781

Home Address: 239 Cleveland St City, State, Zip Code: Ripley, TN 38063

Drivers License#: 054920695 Expiration Date: 10-25-25 State: TN

DOB: 2-9-63 Home Phone Number: 731-612 5707

Banking Information

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

Name of Bank BANK of Ripley

City Ripley State TN Zip 38063

ABA Routing # 084308003

Account # 0118974

Estimated Sales Volume	
Estimated Annual Sales (All sales)	<u>350,000</u>
Estimated Visa/MC/Discover Sales	<u>\$200,000</u>
Estimated Amex Sales	<u>\$50,000</u>
Average Ticket	<u>\$500-1000</u>
**Highest Ticket	<u>\$20,000</u>
% Card Swiped	<u>80</u> %
% Card Keyed In	<u>20</u> %
% Card Present	<u>30</u> %
% Card Not Present	<u>20</u> %
% MOTO	<u>0</u> %
% Internet	<u>0</u> %
% B2B	<u>0</u> %
% International Cards	<u>0</u> %

Terminal Questions

Batch Out Time: 7:00PM

Communication Method:

Dial IP-Internet

Do you dial 9 for outside line? No

Terminal Type

Equipment Purchase

Equipment Replacement Program

PIN Debit Pin Pad No

POS SOFTWARE

Software Name & Version:

Next Day Funding (Yes or No): No

Tip Edit (Yes or No): No

VeriFone VX520

Managing Partner

Managing Partner Name Keith Barlow

Date Submitted 8-13-19

Internal Use Only

Date Received:	IC + :	PCI:	Minimum:
Date Keyed:	Trans Fee:	Statement:	Chargeback:
Date Approved:	AOF:	Gateway:	Return Item:

CONNELL BODY SHOP
239 CLEVELAND ST.
RIPLEY, TN 38063-1229

37976

87-800/843
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CHECK ARMOR
TRADE PROTECTION

PAY
TO THE
ORDER OF

DATE

VOID

\$

DOLLARS

Photo
Safe
Deposit®
Details on back



Bank of Ripley
HOME STYLE SERVICE
RIPLEY, TN 38063
www.BankOfRipley.com

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