


Attached Required Document Checklist		Date	Fax to : 901-692-9499		Version: 007.16	
Voided Check	<input checked="" type="checkbox"/>	Submitted:	email to: applications@Impactpays.net			
Business Verification Document	<input checked="" type="checkbox"/>					
Copy of Drivers License	<input checked="" type="checkbox"/>					
Merchant Application Submission Form						
Merchant (Business) DBA Name: Strokin Diesel						
Business Legal Name: Strokin Diesel				Website:		
Contact Name: Dylan Edgill		Contact Phone Number: 205-616-2022				
Physical Address: 2500 2nd Ave East		City, State, Zip: Oneonta, AL 35121				
Email Address: Blazemoto1@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 #: Ø		EIN/Tax ID #: 47-5003154		
Business Type						
Corporation - Pick One: S-CORP		Type: Ø		Bus Open Date: 2015		
Refund Policy: Ø		Print Policy: Ø		(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 Edgill		Title: Owner		Social Security:		
Home Address: 2500 2nd Ave E		City, State, Zip Code:				
Drivers License#: 6682062		Exp Date: 11-4-2024		State Issued: AL		
DOB: 4-6-1981		Home Phone#: 205-616-2022				
% of Business Owned: 100%		Length of Ownership: 9 years				
Banking Information ** No starter checks or deposit slips accepted**			Terminal Questions (Circle your answer)			
Name of Bank: Hometown Bank		Batch Out Time (for nextday funding 7:00 PM): 7:00pm				
ABA Routing #: 001666		Communication Method: Ø				
Account #: 062206444		Do you dial 9 for outside line? Ø				
Estimated Sales Volume			Terminal Type:			
Estimated Annual Sales (All sales) \$ 70,000		Reprogram Terminal: Ø				
Estimated Visa/MC/Discover Sales \$		Equipment Purchase: Ø				
Estimated Monthly Visa/MC/Discover/ AMEX Sales \$		Equip. Rental Program: Ø				
Average Ticket \$ 5,000		Next Day Funding: Ø				
High Ticket \$ 30,000		Tip Edit: Ø				
First two sections must equal 100% respectively			EBT: Ø FNS Number:			
Card Swiped: 99% Card Keyed In: 1% = 100% Ø		Tax Calculation:		If so tax rate:		
Card Present: Ø% Card Not Present: Ø% = 100% Ø		Software or POS Integration Questions Only				
MOTO: Ø% Internet: Ø%		POS Software Integration:				
Program Type: Ø		Software Name & Version:				
Notes: Rev UP \$14.95/6 months \$ 25.95 after		MP/AP Name: Holley Shirley				
		RP Name: Jennifer Slight				
		Pricing Provided:				
Receipt Header Message:						
Receipt Footer Message:						