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|---|--|---|
| Attached Required Document Checklist | Fax to : 901-692-9499 |  |
| Voided Check | email to: applications@impactpays.net | |
| Business Verification Document | | |
| Copy of Drivers License | | |
| Managing Partner Name: | | |
| Date Submitted: | | |

Merchant Application Submission Form

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|--|---|
| Merchant (Business) DBA Name: Card Solutions | |
| Business Legal Name: Card Solutions Inc | |
| Contact Name: Carl Shultz | Contact Phone Number: 520-834-4944 |
| Physical Address: 8987 E Tanque Verde Rd Ste 309 #154 | City, State, Zip: Tucson, AZ 85749 |
| Phone Number: 520-834-4944 | Fax Number: |
| Email Address: cshultz@cardsolutionsinc.com | Website: |
| Billing Address: Same As Above | City: |
| State: | Zip: |

| Business Type | |
|---|--|
| <input checked="" type="checkbox"/> Corporation - circle one: Private or Public <input type="checkbox"/> LLC - circle one: C corp S corp P partner D disregarded entity <input type="checkbox"/> Sole Prop <input type="checkbox"/> Other: <input type="checkbox"/> Partnership | Business Start Date: 11/2004 EIN/Federal Tax ID# 201872416 Refund Policy? Yes or No Types of Goods Sold: Point of Sale Systems |

Ownership Information (Must be 51% or more) *Might need information on all owners*

| | | |
|---|--|-----------------------------------|
| Officer/Owners Name: Carl Shultz | Title: President | Social Security: 270560743 |
| Home Address: 10301 Calle Descanso | City, State, Zip Code: Tucson, AZ 85749 | |
| Drivers License#: | Expiration Date: | State: |
| DOB: 04/03/1955 | Home Phone Number: 520-834-4944 | |
| % of Business Owned: 60 % | Length of Ownership: | |

Banking Information

A copy of a voided check or a signed verification letter from the bank is required. *No Starter Checks Accepted*

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|--------------------------------------|
| Name of Bank: Bank of America |
| ABA Routing #: 122101706 |
| Account #: 004683099285 |

| Estimated Sales Volume | | Terminal Questions | |
|--|-----------|--|--|
| Estimated Annual Sales (All sales) | \$ | Batch Out Time: 7:30 PM CST | |
| Estimated Annual Visa/MC/Discover/ AMEX Sales | \$ 60,000 | Communication Method: IP-internet Dial-phone WIFI | |
| Estimated Monthly Visa/MC/Discover/ AMEX Sales | \$ | Do you dial 9 for outside line? Yes - No | |
| Average Ticket | \$ 3,000 | Terminal Type: | |
| High Ticket | \$ 10,000 | Pin Pad Type: | |
| First two sections must equal 100% respectively | | Reprogram Terminal: Yes - No | |
| Card Swiped: 75 % Card Keyed In: 25 % = 100% | | Equipment Purchase: Yes - No | |
| Card Present: 75 % Card Not Present: 25 % = 100% | | Equipment Rental Program: Yes - No | |
| MOTO: 25 % Internet: % | | PIN Debit Pin Pad: Yes - No | |
| IBUXX or Traditional | | POS Software Integration: Yes - No | |
| Notes: Swipe Simple Invoicing | | Software Name & Version: | |
| | | Next Day Funding: Yes - No | |
| | | Tip Edit: Yes - No | |