

Attached Required Document Checklist

Voided Check

Business Verification Document

Copy of Drivers License

Date Submitted: **02-02-21**

Fax to: 901-692-9499

email to: **applications@impactpays.net**



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: **Brickbat Bar + Grill**

Business Legal Name: **Brickbat Bar and Grill LLC**

Contact Name: **Scott McDevitt** Contact Phone Number: **618-541-1908**

Physical Address: **122 E Main St.** City, State, Zip: **Teutopolis IL 62467**

Phone Number: **217-857-9700** Fax Number:

Email Address: **brickbat@frontier.com** Website:

Billing Address: **- same -** City:

State: Zip:

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: **8-9-2009**

Refund Policy: 30 days 60 days Other None

EIN/Federal Tax ID# **01-0926999**

Types of Goods Sold: **Food + Beverage**

Print Refund Policy on Footer: Yes (No) (If yes input message in notes)

Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form

Officer/Owners Name: **Scott McDevitt** Title: **Owner** Social Security: **845-76-4841**

Home Address: **307 W John St.** City, State, Zip Code: **Teutopolis IL 62467**

Drivers License#: **M231-7837-8046** Expiration Date: **2-15-2024** State: **IL**

DOB: **2-15-1978** Home Phone Number: **618-541-1908**

% of Business Owned: **100** % Length of Ownership: **15 years**

Banking Information ** No starter checks or deposits

Terminal Questions (Circle your answer)

Name of Bank: **Dieterich Bank** Batch Out Time: **2 AM**

ABA Routing #: **081212574** Communication Method: **IP-internet** or Dial-phone

Account #: **510100693** Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Estimated Annual Sales (All sales)	\$480,000	Reprogram Terminal:	Yes	No
Estimated Visa/MC/Discover Sales	\$	Equipment Purchase:	Yes	No
Estimated Monthly Visa/MC/Discover/ AMEX Sales	\$	Equipment Rental Program:	Yes	No
Average Ticket	\$40.00	Next Day Funding:	Yes	No
High Ticket	\$100.00	Tip Edit:	Yes	No

First two sections must equal 100% respectively

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

Card Present: % Card Not Present % = 100%

MOTO: % Internet: %

Traditional **IBUXX** SimpleBuxx PrimeBuxx

EBT: Yes **No** FNS Number:

Tax Calculation: Yes No If so tax rate: %

Software or POS Integration Questions Only

POS Software Integration: Yes No

Software Name & Version:

Notes: **Scott has owned the Brickbat for 15yrs + only ever taken cash. Wants SKYTAR ASAP But**

MP/AP Name: **Neil Lualaba**

RP Name: **Joey Trupiano**

Pricing Provided: Statement Analysis or Quote

Receipt Header Message: **will use a VL500 until we can get it set up**

Receipt Footer Message: **Thank You for your Business.**