IMPACT
PAYSYSTEM

Ghost Sheet

In order to get our Merchants, set up seamlessly and effortlessly we need as much information as you can upfront. Please fill out all applicable fields.

☐ How does the merchant process cards today?

    ☐ Terminal: ☑ Yes   ☐ No   Make/ Model: _Poy PG/_

    ☐ POS System? ☐ Yes   ☑ No   Name: _____

    ☐ Payment Gateway or Online Shopping Cart? (such as Auth.net, USA ePay, Shopify etc.)

        ☐ Yes   ☑ No   Name: _____

    ☐ Any other Software? _____

☐ Does the Merchant want to keep their current equipment? ☐ Yes   ☑ No

    ☐   Front & Back picture of terminal attached

☐ Line of communication: Is Merchant using IP (Internet wire connected to the internet router) or Dial (phone line) for internet access? ☑ IP   ☐ Dial _~ wifi_

☐ Does Merchant accept Gift Cards or want to accept them? ☐ Yes   ☑ No   ☐ Wants

☐ Does Merchant have a need for ACH recurring billing ☐ Yes   ☑ No   ☐ Wants

☐ Does Merchant need Next Day Funding ☑ Yes   ☐ No   ☐ Wants

☐ Does Merchant want Surcharging Program or Traditional Pricing Program?

    ☐ Surcharge Program   ☑ Traditional Program

Special Request: (ie: landing page, invoicing, dongle, pin debit, etc.) :

Clover mini, cash drawer, scanner

_____

_____

_____

☐ Referred MP Name: _Travis Smith_

☐ Referred RP Name: _____

☐ Merchant Name: _Tropical Blends_