

Attached Required Document Checklist

Voided Check   
Business Verification Document   
Copy of Drivers License

Date Submitted: 9-12-23  
Fax to: 901-692-9499  
email to: applications@impactpays.net



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: GHOP General Store  
Business Legal Name: Sam  
Contact Name: Lisa Taylor Williams Contact Phone Number: 901-413-2857  
Physical Address: 300 Meade Rd City, State, Zip: Batesville, AR 72501  
Phone Number: 901-413-2857 Fax Number: NONE  
Email Address: lisa@ghopgeneralstore.com Website: @gmail.com  
Billing Address: 100 Persimmon Lane City: Rosie  
State: AR Zip: 72521

Business Type

Corporation - circle one: Private or Public  
LLC - circle one: C corp S corp Partnership D disregarded entity  
Sole Prop Other:  
Partnership  
Business Start Date: 4-28-23  
Refund Policy: 30 days 60 days Other None  
EIN/Federal Tax ID# 93-1878632 Print Refund Policy on Footer: Yes No  
Types of Goods Sold: Novelty, shirts, hats, mugs (If yes input message in notes)

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

Officer/Owners Name: Lisa Taylor Title: Co-Owner Social Security: 430-69-4930  
Home Address: 42 Wilford Road City, State, Zip Code: Southside, AR 72501  
Drivers License#: 929764298 Expiration Date: 10/24 State: AR  
DOB: 10-09-1973 Home Phone Number: 901-413-2857  
% of Business Owned: 50 % Length of Ownership: 5 months

Banking Information \*\* No starter checks or deposit slips accepted \*\*

Terminal Questions (Circle your answer)

Name of Bank: Citizens Batch Out Time: 730 pm  
ABA Routing #: 082907736 Communication Method: IP-internet or Dial-phone wifi  
Account #: 33 285 89 Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Terminal Type:  
Reprogram Terminal: Yes No  
Equipment Purchase: Yes No  
Equipment Rental Program: Yes No  
Next Day Funding: Yes No  
Tip Edit: Yes No

Estimated Annual Sales (All sales) \$45,000  
Estimated Visa/MC/Discover Sales \$30,000  
Estimated Monthly Visa/MC/Discover/AMEX Sales \$2500  
Average Ticket \$40.00  
High Ticket \$110.00

First two sections must equal 100% respectively

EBT: Yes No FNS Number:  
Tax Calculation: Yes No If so tax rate: 8 %

Card Swiped: 80 % Card Keyed In: 20 % = 100%  
Card Present: 80 % Card Not Present 20 % = 100%

Software or POS Integration Questions Only

MOTO: % Internet: %  
Traditional IBUXX SimpleBuxx PrimeBuxx

POS Software Integration: Yes No  
Software Name & Version:

Notes: IBUXX

MP/AP Name: Lisa Taylor  
RP Name:  
Pricing Provided: Statement Analysis or Quote

Receipt Header Message:  
Receipt Footer Message: