

Attached Required Document Checklist

- Voided Check
- Business Verification Document
- Copy of Drivers License

Date Submitted: \_\_\_\_\_ Fax to: 901-692-9499  
 email to: applications@impactpays.net



1

Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: \_\_\_\_\_  
 Business Legal Name: Jimmy Butler Auto Sales Inc  
 Contact Name: Jimmy Butler Contact Phone Number: 803-943  
 Physical Address: 907 W Carolina Ave City, State, Zip: Varnville, SC 29944  
 Phone Number: 803-943-2120 Fax Number: \_\_\_\_\_  
 Email Address: jbasinc@yahoo.com Website: \_\_\_\_\_  
 Billing Address: PO Box 352 City: Varnville  
 State: Varnville zip: 29944

Business Type  
 Corporation - circle one: Private or Public  
 LLC - circle one: C corp S corp P partner D disregarded entity  
 Sole Prop Other: INC  
 Partnership  
 Business Start Date: 1-1-2012  
 Refund Policy: 30 days 60 days Other None  
 EIN/Federal Tax ID# 570849080  
 Types of Goods Sold: cars/trailers  
 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: Jimmy A. Butler Title: OWNER Social Security: 251-98-7191  
 Home Address: 2150 Walterboro Hwy City, State, Zip Code: Hampton SC 29924  
 Drivers License#: 004596035 Expiration Date: 10/1/54 State: SC  
 DOB: 10-01-54 Home Phone Number: \_\_\_\_\_  
 % of Business Owned: 100 % Length of Ownership: 100 %

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

Terminal Questions (Circle your answer)

Name of Bank: Palmetto State Bank  
 ABA Routing #: 053202596  
 Account #: 0069264522

Batch Out Time: 5:00 PM  
 Communication Method: IP-internet or Dial-phone  
 Do you dial 9 for outside line? Yes No

Estimated Sales Volume  
 Estimated Annual Sales (All sales) Seasonal \$5000  
 Estimated Visa/MC/Discover Sales \$  
 Estimated Monthly Visa/MC/Discover/AMEX Sales \$5000  
 Average Ticket seasonal \$300  
 High Ticket this account sometimes \$18000<sup>00</sup>

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

First two sections must equal 100% respectively

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

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

Software or POS Integration Questions Only

MOTO: % Internet: %  
 Traditional IBUXX SimpleBuxx PrimeBuxx

POS Software Integration: Yes No  
 Software Name & Version:

Notes: Standard IBuxx tires

MP/AP Name: K. Dease  
 RP Name:  
 Pricing Provided: Statement Analysis or Quote

Receipt Header Message: Kristy Dease

Receipt Footer Message: