

<b>Attached Required Document Checklist</b>		Date	Fax to : 901-692-9499
Voided Check <input checked="" type="checkbox"/>		Submitted:	email to:
Business Verification Document <input checked="" type="checkbox"/>			applications@impactpays.net
Copy of Drivers License <input checked="" type="checkbox"/>			



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: GRAB & GO MARKET

Business Legal Name: GRAB & GO MARKET, LLC

Contact Name: DEKEE LARSON Contact Phone Number: ALEC ESTRADA 808-793-0999

Physical Address: 1993 S. KIHEI RD #10 City, State, Zip: KIHEI, HI 96753-7834

Phone Number: 808-793-0999 Fax Number:

Email Address: ALEC ESTRADA 333@GMAIL.COM Website:

Billing Address: 1993 S. KIHEI RD City: KIHEI

State: HI Zip: 96753

Business Type

Corporation - circle one: Private or Public

Business Start Date: 4/1/21 *gift returns*

LLC - circle one: C corp S corp P partner D disregarded entity

Refund Policy: 30 days 60 days Other None

Sole Prop Other:

EIN/Federal Tax ID# 86-1841207 Print Refund Policy on Footer: Yes  No

Partnership

Types of Goods Sold: Alcohol, food, vape (If yes input message in notes)

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

Officer/Owners Name: Demick Larson Title: OWNER Social Security: 501-92-6428

Home Address: 2725 W. LAKE RIDGE SHORES City, State, Zip Code: RENO, NV

Drivers License#: 0702 121904 Expiration Date: 5/26/2024 State: NV

DOB: 5/26/1964 Home Phone Number: 775-544-5482

% of Business Owned: 75 % Length of Ownership: 2.5 years (2021)

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

Terminal Questions (Circle your answer)

Name of Bank: Bank of Hawaii Batch Out Time: Midnight

ABA Routing #: 121301028 Communication Method: IP-internet or Dial-phone

Account #: 0081296260 Do you dial 9 for outside line? Yes  No

Estimated Sales Volume

Terminal Type: CLOVER X2 + 1 customer facing

Estimated Annual Sales (All sales)	\$ <u>1.2 million</u>	Reprogram Terminal:	Yes <input checked="" type="checkbox"/> No
Estimated Visa/MC/Discover Sales	\$ <u>80%</u>	Equipment Purchase:	<u>Yes</u> <input checked="" type="checkbox"/> No <u>KASIE TO AIRCHASE</u>
Estimated Monthly Visa/MC/Discover/ AMEX Sales	\$ <u>100K</u>	Equipment Rental Program:	Yes <input checked="" type="checkbox"/> No
Average Ticket	\$ <u>16</u>	Next Day Funding:	<u>Yes</u> <input checked="" type="checkbox"/> No <u>Unless conflicts w/ Hawaii time</u>
High Ticket	\$ <u>100.00</u>	Tip Edit:	Yes <input checked="" type="checkbox"/> No

First two sections must equal 100% respectively

Card Swiped: <u>100</u> %	Card Keyed In: %	= 100%	EBT: Yes <input checked="" type="checkbox"/> FNS Number:
Card Present: <u>-</u> %	Card Not Present: %	= 100%	Tax Calculation: Yes No If so tax rate: <u>4</u> %
MOTO: %	Internet: %		Software or POS Integration Questions Only
Traditional <u>IBUXX</u>	SimpleBuxx	PrimeBuxx	POS Software Integration: <u>Yes</u> No
Software Name & Version: <u>Quickbooks</u>			MP/AP Name:
Notes: <u>Kasie buys equipment. Merchant does 47 IBUXX</u>			RP Name:
<u>2 clovers + 1 customer facing</u>			Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Receipt Footer Message: