

Attached Required Document Checklist

Voided Check Business Verification Document Copy of Drivers License

Date Submitted:

1-6-22

Fax to : 901-692-9499

email to:

applications@impactpays.net



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: West Tn Flooring

Business Legal Name: Same

Contact Name: Riley Martin Contact Phone Number:

Physical Address: 1202 US 45 Hwy N. City, State, Zip: Henderson TN 38340

Phone Number: 731-439-7865 Fax Number:

Email Address: Riley.martin2410@yahoo.com Website:

Billing Address: Same City:

State: Zip:

Business Type

Corporation - circle one: Private or Public

Business Start Date: 1-1-22

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

Refund Policy: 30 days 60 days Other (None)

Sole Prop Other:

Partnership

EIN/Federal Tax ID#

Print Refund Policy on Footer:

Yes (No)

(If yes input message in notes)

Types of Goods Sold: Flooring

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

Officer/Owners Name: Riley Martin Title: Owner Social Security: 408 85 5591

Home Address: 1662 High School Rd City, State, Zip Code: Selmer TN 38375

Drivers License #: 126325037 Expiration Date: 6/4/27 State: TN

DOB: 5/27/98 Home Phone Number: 731 439 7865

% of Business Owned: 100% Length of Ownership:

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

Terminal Questions (Circle your answer)

Name of Bank: Bank of Fayette County

Batch Out Time: 6pm

ABA Routing #: 084304337

Communication Method: Internet or Dial-phone

Account #: 10234756

Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Terminal Type:

Estimated Annual Sales (All sales) \$

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 \$2500

Next Day Funding: Yes No

High Ticket \$15K

Tip Edit: Yes No

First two sections must equal 100% respectively

EBT: Yes No FNS Number:

Card Swiped: 99 % Card Keyed In: 1 % = 100%

Tax Calculation: Yes No If so tax rate: %

Card Present: 99 % Card Not Present: 1 % = 100%

Software or POS Integration Questions Only

MOTO: 0 % Internet: 0 %

POS Software Integration: Yes No

Traditional IBUXX SimpleBUXX PrimeBUXX

Software Name & Version:

Notes: Bank of Fayette customer

MP/AP Name: Tricia Wright

RP Name:

Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Receipt Footer Message: