

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



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: Nonnie and GiGi's Place
 Business Legal Name: Nonnie and GiGi's Place
 Contact Name: Kimberly Croser Contact Phone Number: 931-796-5477
 Physical Address: 15 E main st City, State, Zip: Hoboken TN 38462
 Phone Number: 931-796-5477 Fax Number: N/A
 Email Address: k.croser79@gmail.com Website: www.nonnieandgigisplace.com
 Billing Address: 15 E Main St City: Hoboken
 State: TN Zip: 38462

Business Type

Corporation - circle one: Private or Public Business Start Date: 8/1/23
 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# 93-2546779 Print Refund Policy on Footer:
 Partnership Types of Goods Sold: Clothing Flowers 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: Kimberly Croser Title: _____ Social Security: 24645-5837
 Home Address: 1019 South St City, State, Zip Code: Hoboken TN 38462
 Drivers License#: 148943389 Expiration Date: 4/1/31 State: TN
 DOB: 10/18/79 Home Phone Number: 865-640-1693
 % of Business Owned: 100 % Length of Ownership: 21 Days

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

Terminal Questions (Circle your answer)

Name of Bank: Regions Bank Batch Out Time: 6 pm
 ABA Routing #: 204000017 Communication Method: IP-Internet or Dial-phone
 Account #: 0332502922 Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Terminal Type: Valor

Estimated Annual Sales (All sales)	<u>\$100,000</u>	Reprogram Terminal:	Yes <input type="radio"/> No <input checked="" type="radio"/>
Estimated Visa/MC/Discover Sales	<u>\$80,000</u>	Equipment Purchase:	Yes <input type="radio"/> No <input checked="" type="radio"/>
Estimated Monthly Visa/MC/Discover/AMEX Sales	<u>\$2,500</u>	Equipment Rental Program:	<input checked="" type="radio"/> Yes <input type="radio"/> No
Average Ticket	<u>\$45</u>	Next Day Funding:	<input checked="" type="radio"/> Yes <input type="radio"/> No
High Ticket	<u>\$2500</u>	Tip Edit:	<input checked="" type="radio"/> Yes <input type="radio"/> No

First two sections must equal 100% respectively

EBT: Yes No FNS Number:

Card Swiped: 95 % Card Keyed In: 5 % = 100%
 Card Present: 95 % Card Not Present 5 % = 100%

Tax Calculation: Yes No If so tax rate: 9.75 %

Software or POS Integration Questions Only

MOTO: % Internet: %
 Traditional IBUX SimpleBux PrimeBux

POS Software Integration: Yes No

Notes: Valor 100 24.95

Software Name & Version:

MP/AP Name:

RP Name:

Pricing Provided: Statement Analysis or Quote

Receipt Header Message: Nonnie & GiGi's Place

Receipt Footer Message: All sales are final!