


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

Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: P+D FIREWORKS

Business Legal Name: P+D FIREWORKS

Contact Name: PHILLIP VANDERFORD Contact Phone Number: 931-209-1127

Physical Address: 1080 HWY 49 City, State, Zip: TN RIDGE, TN 37178

Phone Number: N/A Fax Number: N/A

Email Address: PHILLIP_VANDERFORD@YAHOO.COM Website: N/A

Billing Address: P.O. BOX 528 City: MEWEN

State: TN Zip: 37101

Business Type

Corporation - circle one: Private or Public

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

Sole Prop Other: Partnership

Business Start Date: 6-20-23

Refund Policy: 30 days 60 days Other None

EIN/Federal Tax ID# 62-1282343 Print Refund Policy on Footer: Yes No

Types of Goods Sold: FIREWORKS (If yes input message in notes)

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

Officer/Owners Name: PHILLIP VANDERFORD Title: MANAGER Social Security: 409-02-6985

Home Address: 309 DOGWOOD CIR. City, State, Zip Code: WAVENLY, TN 37185

Drivers License#: 049557698 Expiration Date: 9-5-27 State: TN

DOB: 9-12-59 Home Phone Number: N/A

% of Business Owned: 100% Length of Ownership: 1 MONTH

Banking Information ** No starter checks or deposit slips accepted**	Terminal Questions (Circle your answer)
Name of Bank <u>FIRST FEDERAL BANK</u>	Batch Out Time: <u>1 gm</u>
ABA Routing # <u>264171270</u>	Communication Method: IP-Internet or Dial-phone
Account # <u>0963302046</u>	Do you dial 9 for outside line? Yes <u>No</u>
Estimated Sales Volume	Terminal Type: <u>swipe simple Bluetooth</u>
Estimated Annual Sales (All sales) <u>\$50,000</u>	Reprogram Terminal: Yes <u>No</u>
Estimated Visa/MC/Discover Sales <u>\$20,000</u>	Equipment Purchase: Yes <u>No</u>
Estimated Monthly Visa/MC/Discover/AMEX Sales <u>\$25,000</u>	Equipment Rental Program: <u>Yes</u> No
Average Ticket <u>\$200</u>	Next Day Funding: <u>Yes</u> No
High Ticket <u>\$2500</u>	Tip Edit: Yes <u>No</u>
First two sections must equal 100% respectively	EBT: Yes No FNS Number:
Card Swiped: <u>95</u> % Card Keyed In: <u>5</u> % =100%	Tax Calculation: Yes No If so tax rate: _____%
Card Present: <u>95</u> % Card Not Present <u>5</u> % =100%	Software or POS Integration Questions Only
MOTO: <u>0</u> % Internet: <u>0</u> %	POS Software Integration: Yes No
Traditional <u>IBUXX</u> SimpleBuxx PrimeBuxx	Software Name & Version:
Notes: <u>swipe simple card reader</u>	MP/AP Name:
	RP Name:
	Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Receipt Footer Message: