


Attached Required Document Checklist		Date	Fax to : 901-692-9499	
Voided Check	<input checked="" type="checkbox"/>	Submitted:	email to: applications@impactpays.net	
Business Verification Document	<input checked="" type="checkbox"/>	12-21-23		
Copy of Drivers License	<input checked="" type="checkbox"/>			

Merchant Application Submission Form

Merchant (Business) DBA Name:		Lakeland Cleaners		
Business Legal Name:	Elrod Cleaners LLC	Website:		
Contact Name:	Matthew Elrod	Contact Phone Number:	901 490-1066	
Physical Address:	3706 Canada Rd	City, State, Zip:	Lakeland, TN 38002	
Email Address:	MATHElrod@icloud.com	Phone #:		
Billing Address:	SAME	City, State, Zip:		
Biz Phone #:	901 213 1112	Biz Fax #:	EIN/Tax ID #:	93-4660676

Business Type				
Corporation - Pick One:	Type:	Sole	Bus Open Date:	1-2-24
Refund Policy:	None	Print Policy:	No	(If yes input refund message)
Types of Goods Sold:	dry cleaning services			

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

Officer/Owners Name:	Matthew Elrod	Title:	owner	Social Security:	408-85-7339
Home Address:	1047 Perkins Terrace	City, State, Zip Code:	Memphis TN 38117		
Drivers License#:	124216541	Exp Date:	5-26-27	State Issued:	TN
DOB:	06-02-1998	Home Phone#:	901-490-1066		
% of Business Owned:	100 %	Length of Ownership:	New		

Banking Information ** No starter checks or deposit slips accepted** **Terminal Questions (Circle your answer)**

Name of Bank	Regions	Batch Out Time (for nextday funding 7:00 PM):	7:00pm
ABA Routing #	064000017	Communication Method:	Wi-Fi
Account #	0350804545	Do you dial 9 for outside line?	No

Estimated Sales Volume		Terminal Type:	we will use what's there
Estimated Annual Sales (All sales)	\$	Reprogram Terminal:	yes
Estimated Visa/MC/Discover Sales	\$	Equipment Purchase:	No
Estimated Monthly Visa/MC/Discover/ AMEX Sales	\$	Equip. Rental Program:	yes
Average Ticket	\$	Next Day Funding:	yes
High Ticket	\$	Tip Edit:	No

First two sections must equal 100% respectively

Card Swiped: 98 %	Card Keyed In: 2 %	= 100% 0	EBT:	FNS Number:
Card Present: 98 %	Card Not Present: 2 %	= 100% 0	Tax Calculation:	If so tax rate:

Software or POS Integration Questions Only

MOTO: %	Internet: %	POS Software Integration:	
Program Type:		Software Name & Version:	
Notes:	1/2 IBUXY 2% to customer	MP/AP Name:	Copeland
	1/2 IBUXY to merchant 1.95	RP Name:	
	IBUXY	Pricing Provided:	

Receipt Header Message:	Same as New
Receipt Footer Message:	Same as New

VT + Valor 100