Attached Required Document Checklist	Fax to : 901-692-9499	
Voided Check ☐		
Copy of Drivers License ☐	email to: applications@impactpays.net	IMPACT PAYMENT PARTNERS
Managing Partner Name:		
Date Submitted: 05/04/2020		

Merchant Application Submission Form

Merchant (Business) DBA Name: HEAVY DUTY DIESEL GROUP US

Business Legal Name: Export Diesel LLC

Contact Name: CARLOS FIGUEROA **Contact Phone Number:** (305) 396 1943

Physical Addres 2234 Dunn Ave **City, State, Zip:** Memphis, TN 38114

Phone Number: +1 901 300 5809 **Fax Number:**

Email Address: info@dieselgroupus.com **Website:** www.dieselgroupus.com

Billing Address: 1835 NW 112th Ave #173 **City:** Miami

State: FL **Zip:** 33172

Business Type

☐ Corporation - circle one: Private or Public	**Business Start Date:** 01/10/2010
☒ LLC - circle one: C corp S corp P partner D disregarded entity	
☐ Sole Prop ☐ Other:	**Federal Tax ID#** 270-979494 **Refund Policy?** Yes or No
☐ Partnership	**Types of Goods Sold:** Parts

Ownership Information (Must be 51% or more)

Officer/Owners Name: Carlos figueroa **Title:** OWNER **Social Security:** XXX-XX-XXXX

Home Address: 1835 NW 112th Ave **City, State, Zip Code:** Miami Fl

Drivers License#: **Expiration Date:** **State:**

DOB: 04/04/1986 **Home Phone Number:** 305-7205656

% of Business Owned: 100' % **Length of Ownership:** 10 years - 5

Banking Information

☐ Bank Reference (a copy of a voided check or a DDA verification letter from the bank is *required*)

Name of Bank Bank of America

ABA Routing # 026 009593

Account # 898 038738462

Estimated Sales Volume		Terminal Questions	
Estimated Annual Sales (All sales)	$ 2K	**Batch Out Time:**	
Estimated Visa/MC/Discover Sales	$	**Communication Method:** IP-internet or Dial-phone	
Estimated Monthly Visa/MC/Discover/ AMEX Sales	$	**Do you dial 9 for outside line?** ☐ Yes - ☐ No	
Average Ticket	$	**Terminal Type:**	
High Ticket	$	**Pin Pad Type:**	
First two sections must equal 100% respectively		**Reprogram Terminal:** ☐ Yes - ☐ No	
Card Swiped: % Card Keyed In: % = 100%		**Equipment Purchase:** ☐ Yes - ☒ No	
Card Present: % Card Not Present % =100%		**Equipment Rental Program:** ☒ Yes - ☐ No	
MOTO: % Internet: %		**PIN Debit Pin Pad:** ☐ Yes - ☐ No	
Notes:		**POS Software Integration:** ☐ Yes - ☒ No	
		Software Name & Version:	
		Next Day Funding: ☐ Yes - ☐ No	
		Tip Edit: ☐ Yes - ☐ No	

Version: 003