


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

Version: 005

**Merchant Application Submission Form**

Merchant (Business) DBA Name: OHS BBQ Wesley OHS

Business Legal Name: OHS BBQ

Contact Name: Wesley OHS Contact Phone Number: 615-947-7990

Physical Address: 105 Meeks Ave City, State, Zip: Burns, TN 37029

Phone Number: 615-947-7990 Fax Number:

Email Address: OHSbbq2020@gmail.com Website:

Billing Address: 116 Tracy Academy St City: Charlotte

State: TN Zip: 37036

**Business Type**

Corporation - circle one: Private or Public

Business Start Date: 9-1-2020

LLC - circle one: C corp S corp Partner D disregarded entity

Refund Policy: 30 days 60 days Other None

Sole Prop Other: Partnership

EIN/Federal Tax ID# 85-3044871 Print Refund Policy on Footer: Yes No

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

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

Officer/Owners Name: Wesley OHS Title: Mr Social Security: 591-02-6350

Home Address: 116 Tracy Academy St City, State, Zip Code: Charlotte TN 37036

Drivers License#: 1D1601927 Expiration Date: 11-19-2027 State: TN

DOB: 11-19-1984 Home Phone Number: 615-947-7990

% of Business Owned: 100 % Length of Ownership: 3 yr 4 month

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

**Terminal Questions (Circle your answer)**

Name of Bank: First Bank Batch Out Time: 9 pm central

ABA Routing #: 084307033 Communication Method: IP-Internet or Dial-phone

Account #: 88347364 Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Estimated Annual Sales (All sales)	<u>\$225,000</u>	Reprogram Terminal:	Yes	<u>No</u>
Estimated Visa/MC/Discover Sales	<u>\$15,000</u>	Equipment Purchase:	Yes	<u>No</u>
Estimated Monthly Visa/MC/Discover/AMEX Sales	<u>\$1,500</u>	Equipment Rental Program:	<u>Yes</u>	No
Average Ticket	<u>\$25.00</u>	Next Day Funding:	<u>Yes</u>	No
High Ticket	<u>\$350.00</u>	Tip Edit:	<u>Yes</u>	No

**First two sections must equal 100% respectively**

Card Swiped: 95 % Card Keyed In: 5 % = 100%

Card Present: 95 % Card Not Present 5 % = 100%

MOTO: 0 % Internet: 20 %

EBT: Yes No FNS Number:

Tax Calculation: Yes No If so tax rate: \_\_\_\_\_ %

**Software or POS Integration Questions Only**

Traditional IBUXX SimpleBuxx PrimeBuxx

POS Software Integration: Yes No

Software Name & Version:

Notes: Advantage Program

MP/AP Name:

RP Name:

Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Receipt Footer Message: