

Attached Required Document Checklist

Voided Check
 Business Verification Document
 Copy of Drivers License

Date

Fax to : 901-692-9499

Submitted:

12-14-24

email to:

applications@impactpays.net



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name:

JSL LLC dba Quick Cash Pawn

Business Legal Name:

Quick Cash Pawn

Contact Name:

Mr. James Brunson

Contact Phone Number:

803-943-

Physical Address:

1129 Elm St. West

City, State, Zip:

Hampton SC 29924

Phone Number: (?)

Fax Number:

Email Address:

JSL29924@yahoo.com

Website:

Billing Address:

PO BOX 103

City:

Hampton

State:

SC

Zip:

29924

Business Type

Corporation - circle one: Private or Public

Business Start Date:

3-1-2011

LLC - circle one: C corp S corp P partner D disregarded entityRefund Policy: 30 days 60 days Other None 7 days

Sole Prop

Other:

EIN/Federal Tax ID#

27-4612888

Print Refund Policy on Footer:

Yes No

Partnership

Types of Goods Sold:

Pawn Shop

(If yes input message in notes)

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

Officer/Owners Name:

James E Brunson

Title:

President

Social Security:

247-88-3768

Home Address:

235 Williams LN

City, State, Zip Code:

Hampton SC 29924

Drivers License#:

004626572

Expiration Date:

11-2-27

State:

SC

DOB:

11-2-1953

Home Phone Number:

-

% of Business Owned:

100 %

Length of Ownership:

2011

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

Terminal Questions (Circle your answer)

Name of Bank

Batch Out Time:

5:00 PM

ABA Routing #

voided check

Communication Method: P-internet or Dial-phone

(Ethernet)

Account #

Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Terminal Type:

IBUXX

Estimated Annual Sales (All sales)

\$200K

Reprogram Terminal:

Yes

 No

Estimated Visa/MC/Discover Sales

\$50K

Equipment Purchase:

Yes

 No

Estimated Monthly Visa/MC/Discover/AMEX Sales

\$

Equipment Rental Program:

Yes

 No

Average Ticket

\$100-

Next Day Funding:

Yes

 No

High Ticket

\$1500-

Tip Edit:

Yes

 No

First two sections must equal 100% respectively

EBT: Yes No FNS Number:

Card Swiped: 100

% Card Keyed In:

% = 100%

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

Card Present: 100

% Card Not Present

% = 00%

Software or POS Integration Questions Only

MOTO:

% Internet

%

POS Software Integration:

Yes

No

Traditional

 BUXX

SimpleBUXX

PrimeBUXX

Software Name & Version:

Notes:

IBUXX 1995

MP/AP Name:

RP Name:

Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Quick Cash Pawn

Receipt Footer Message:

803-943-4400