

Voided Check
 Business Verification Document
 Copy of Drivers License

Submitted: _____
 email to: applications@impactpays.net



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: EL RANCHO NUEVO
 Business Legal Name: EL RANCHO NUEVO, INC.
 Contact Name: Agustin Angel Contact Phone Number: 217-821-4655
 Physical Address: 1433 N. 5th St. City, State, Zip: Vandalia, IL 62471
 Phone Number: 1618-283-2338 Fax Number: _____
 Email Address: AgustinAngel28@gmail.com (Agustin's) Website: Face book site
 Billing Address: 1433 N. 5th St City: Vandalia
 State: IL Zip: 62471

217-259-2400

Business Type

Corporation - circle one: Private or Public Business Start Date: 2002
 LLC - circle one: C corp S corp P partner D disregarded entity Refund Policy: 30 days 60 days Other None
 Sole Prop Other: _____ EIN/Federal Tax ID# 37-1415152 Print Refund Policy on Footer: Yes No
 Partnership Types of Goods Sold: Food/Drinks (If yes input message in notes)

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

Officer/Owners Name: Agustin Angel Title: Owner Social Security: Puerto Vallarta on File
 Home Address: 146314 N AMBER LN City, State, Zip Code: Effingham IL 62401
 Drivers License#: A524-0007-4276 Expiration Date: 09-28-2024 State: IL
 DOB: 9/28/1974 Home Phone Number: _____
 % of Business Owned: 100 % Length of Ownership: 20 Yrs

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

Terminal Questions (Circle your answer)

Name of Bank: Bank of Hillsboro Batch Out Time: 12:00 AM
 ABA Routing #: 081904798 Communication Method: IP-internet or Dial-phone
 Account #: 6171851 Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Terminal Type:

Estimated Annual Sales (All sales)	<u>\$ 840,000</u>	Reprogram Terminal:	Yes	<u>No</u>
Estimated Visa/MC/Discover Sales	<u>\$ 804,000</u>	Equipment Purchase:	Yes	No
Estimated Monthly Visa/MC/Discover/ AMEX Sales	<u>\$ 67K</u>	Equipment Rental Program:	Yes	No
Average Ticket	<u>\$25</u>	Next Day Funding:	Yes	No
High Ticket	<u>\$150</u>	Tip Edit:	Yes	No

First two sections must equal 100% respectively

EBT: Yes No FNS Number:

Card Swiped: 99 % Card Keyed In: 1 % = 100% Tax Calculation: Yes No If so tax rate: _____ %
 Card Present: 99 % Card Not Present 1 % = 100%

Software or POS Integration Questions Only

MOTO: _____ % Internet: 0 % POS Software Integration: Yes No
 Traditional IBUXX SimpleBuxx PrimeBuxx Software Name & Version:

Notes: 1-VL100 Valor Terminal to replace their Heartland Terminal (\$24.95 per mo.)
 MP/AP Name: Neil Luallen
 RP Name: Joey Trupiano
 Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Receipt Footer Message: Thank You For Your Business!