


Attached Required Document Checklist		Date Submitted:	Fax to: 901-692-9499	Version: 007.16	
Voided Check	<input checked="" type="checkbox"/>		email to: applications@impactpays.net		
Business Verification Document	<input checked="" type="checkbox"/>				
Copy of Drivers License	<input checked="" type="checkbox"/>				
Merchant Application Submission Form					
Merchant (Business) DBA Name:		Evans Florist		Website: <input checked="" type="checkbox"/>	
Business Legal Name:		Evans Florist			
Contact Name:	Terry Henry		Contact Phone Number:	205-446-5030	
Physical Address:	410 1st Ave East		City, State, Zip:	Oneonta, AL 35121	
Email Address:	therry440@gmail.com		Phone #:	205-446-5030	
Billing Address:	410 1st Ave East		City, State, Zip:	Oneonta, AL 35121	
Biz Phone #:	205-274-2180	Biz Fax #:		EIN/Tax ID #:	050006914
Business Type					
Corporation - Pick One:	DBA	Type:		Bus Open Date:	
Refund Policy:		Print Policy:		(If yes input refund message)	
Types of Goods Sold:		Convenience Store Terry Evans DBA Sslcprop			
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form					
Officer/Owners Name:	Terry Henry		Title:	Owner	Social Security:
Home Address:	908 Park Ave		City, State, Zip Code:	Oneonta, AL 35121	
Drivers License#:	5895770	Exp Date:		State Issued:	AL
DOB:	7-13-69	Home Phone#:	205-446-5030		
% of Business Owned:	100%	Length of Ownership:	20 years		
Banking Information ** No starter checks or deposit slips accepted**			Terminal Questions (Circle your answer)		
Name of Bank:	Hometown		Batch Out Time (for nextday funding 7:00 PM):	7:00 pm	
ABA Routing #:	011453		Communication Method:		
Account #:	062206444		Do you dial 9 for outside line?	-	
Estimated Sales Volume			Terminal Type:		
Estimated Annual Sales (All sales)	\$ 25,000.00		Reprogram Terminal:		
Estimated Visa/MC/Discover Sales	\$		Equipment Purchase:		
Estimated Monthly Visa/MC/Discover/AMEX Sales	\$		Equip. Rental Program:		
Average Ticket	\$ 110.00		Next Day Funding:		
High Ticket	\$ 525.00		Tip Edit:		
First two sections must equal 100% respectively			EBT:	FNS Number:	
Card Swiped:	99 %	Card Keyed In:	1 % = 100% 0	Tax Calculation:	If so tax rate:
Card Present:	%	Card Not Present	% = 100% 0	Software or POS Integration Questions Only	
MOTO:	%	Internet:	%	POS Software Integration:	
Program Type:	Rev UP		Software Name & Version:		
Notes:	1Boxx 3.95% \$ 14.95/mo \$ 25.95 After Rev UP program		MP/AP Name:	Holley Shirley	
			RP Name:	Jennifer Slight	
			Pricing Provided:		
Receipt Header Message:					
Receipt Footer Message:					