


<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: Breeden's Old Country Store

Business Legal Name: Angels Breeden

Contact Name: Angels Breeden Contact Phone Number: 615-866-7803

Physical Address: 2007 Hwy 100 City, State, Zip: Centerville, TN 37033

Phone Number: 931-716-0864 Fax Number: -

Email Address: abbreeden@gmail.com Website:

Billing Address: 2007 Hwy 100 City: Centerville

State: TN Zip: 37033

Business Type

Corporation - circle one: Private or Public

LLC - circle one: C corp S corp P partner D disregarded entity

Sole Prop Other: Partnership

Business Start Date: Nov 2023

Refund Policy: 30 days 60 days Other None

EIN/Federal Tax ID# 73-3094454 Print Refund Policy on Footer: Yes No (If yes input message in notes)

Types of Goods Sold: Food + Drink

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

Officer/Owners Name: Angela Breeden Title: Owner Social Security: 415-15-8082

Home Address: 205 Westmeade Dr City, State, Zip Code: Dickson TN 37033

Drivers License#: 059283669 Expiration Date: 03/26/2023 State: TN

DOB: 12-01-1965 Home Phone Number: 615-866-7803

% of Business Owned: 100 % Length of Ownership: 7 month

Banking Information ** No starter checks or deposit slips accepted **	Terminal Questions (Circle your answer)
Name of Bank: <u>Traditions</u>	Batch Out Time: <u>6:30 pm</u>
ABA Routing #: <u>064108650</u>	Communication Method: <u>IP-internet</u> or Dial-phone
Account #: <u>2014505</u>	Do you dial 9 for outside line? Yes <u>No</u>
Estimated Sales Volume	Terminal Type: <u>VL 100</u>
Estimated Annual Sales (All sales) <u>\$496,000</u>	Reprogram Terminal: Yes <u>No</u>
Estimated Visa/MC/Discover Sales <u>\$34,000</u>	Equipment Purchase: Yes <u>No</u>
Estimated Monthly Visa/MC/Discover/AMEX Sales <u>\$34,500</u>	Equipment Rental Program: <u>Yes</u> No
Average Ticket <u>\$25.00</u>	Next Day Funding: <u>Yes</u> No
High Ticket <u>\$1500.00</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: 0 %

Traditional IBUXX SimpleBuxx PrimeBuxx

Notes: VL 100 3.5%

EBT: Yes No FNS Number: \_\_\_\_\_

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

Software or POS Integration Questions Only

POS Software Integration: Yes No

Software Name & Version: \_\_\_\_\_

MP/AP Name: \_\_\_\_\_

RP Name: \_\_\_\_\_

Pricing Provided: Statement Analysis or Quote

Receipt Header Message:

Receipt Footer Message: