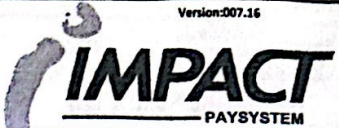


Attached Required Document Checklist		Date	Fax to: 901-692-9499	
Voided Check	<input type="checkbox"/>	Submitted:	email to:	
Business Verification Document	<input type="checkbox"/>		applications@impactpays.net	
Copy of Drivers License	<input type="checkbox"/>			

Merchant Application Submission Form

Merchant (Business) DBA Name: Blount County Memorial Museum		Website: <input checked="" type="checkbox"/>	
Business Legal Name: Blount County Memorial Museum		Contact Phone Number: 205-353-3304	
Contact Name: Amy Rhudy	Physical Address: 220 2nd Street N		
City, State, Zip: Oneonta, AL 35121		Phone #: 205-625-6905	
Email Address: arhudy@blountcountyal.gov		Billing Address: P.O. Box 45	
City, State, Zip: Oneonta, AL 35121		Biz Phone #: 205-625-6905	
Biz Fax #: <input checked="" type="checkbox"/>		EIN/Tax ID #:	

Business Type			
Corporation - Pick One: non profit	Type: <input type="checkbox"/>	Bus Open Date:	
Refund Policy: <input checked="" type="checkbox"/>	Print Policy: <input checked="" type="checkbox"/>	(If yes input refund message)	
Types of Goods Sold: Convenience Store			

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

Officer/Owners Name: Stanley MISS	Title: President	Social Security: 419-60-0187
Home Address: 4339 Mountain Street	City, State, Zip Code: Pinson, AL 35126	
Drivers License#: 3283095	Exp Date: 6-21-2027	State Issued: AL
DOB: 12-10-1946	Home Phone#: 205-625-6905	
% of Business Owned: %	Length of Ownership:	

Banking Information ** No starter checks or deposit slips accepted** **Terminal Questions (Circle your answer)**

Name of Bank: Hometown Bank	Batch Out Time (for nextday funding 7:00 PM): 7:00 PM
ABA Routing #: 062206444	Communication Method: .
Account #: 2084898	Do you dial 9 for outside line? -

Estimated Sales Volume		Terminal Type:	
Estimated Annual Sales (All sales) \$		Reprogram Terminal: .	
Estimated Visa/MC/Discover Sales \$		Equipment Purchase: .	
Estimated Monthly Visa/MC/Discover/ AMEX Sales \$ unsure		Equip. Rental Program: .	
new to credit cards ← Average Ticket \$		Next Day Funding: .	
never taken before High Ticket \$		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:
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Software or POS Integration Questions Only

MOTO: %	Internet: %	POS Software Integration: .
Program Type: .		Software Name & Version:
Notes: \$20.95/month per doc VA 100 text receipt 3.95% customer IDUXX available		MP/AP Name: Holley Shirley
		RP Name: Jennifer Sligh
		Pricing Provided:

Receipt Header Message:
Receipt Footer Message: