


Attached Required Document Checklist		Date	Fax to : 901-692-9499	 Version: 005
Voided Check <input checked="" type="checkbox"/>	Business Verification Document <input checked="" type="checkbox"/>	Submitted: 5-2-23	email to: applications@impactpays.net	
Copy of Drivers License <input checked="" type="checkbox"/>				
Merchant Application Submission Form				
Merchant (Business) DBA Name: Bestwestern Plus				
Business Legal Name: Craft-Goodman Lodging LLC				
Contact Name: Bhupendra Patel		Contact Phone Number: 662-205-4031		
Physical Address: 7904 Craft-Goodman ^{Frontage} Rd City, State, Zip: Olive Branch MS 38654				
Phone Number: 662-932-7110		Fax Number:		
Email Address: Sloan@wealthhg.com		Website:		
Billing Address: 1020 N Gloster st #110				City: Tupelo
State: MS		Zip: 38804		
Business Type				
Corporation - circle one: Private or Public		Business Start Date:		
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# 82-0648764	Print Refund Policy on Footer: Yes No	
Partnership		Types of Goods Sold: Lodging	(If yes input message in notes)	
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form				
Officer/Owners Name: Bhupendra Patel		Title: owner	Social Security: 421-35-5237	
Home Address: 2749 Bayhill Woods		City, State, Zip Code: Collierville TN 38012		
Drivers License#: 143640281		Expiration Date: 9/24/27	State: TN	
DOB: 9/13/78		Home Phone Number: 662-205-4031		
% of Business Owned: 51 %		Length of Ownership:		
Banking Information ** No starter checks or deposit slips accepted **		Terminal Questions (Circle your answer)		
Name of Bank West TN Bank		Batch Out Time:		
ABA Routing # 084303639		Communication Method: IP-internet or Dial-phone		
Account # 400084		Do you dial 9 for outside line? Yes No		
Estimated Sales Volume		Terminal Type:		
Estimated Annual Sales (All sales)	\$2.3 million	Reprogram Terminal:	Yes	No
Estimated Visa/MC/Discover Sales	\$	Equipment Purchase:	Yes	No
Estimated Monthly Visa/MC/Discover/AMEX Sales	\$	Equipment Rental Program:	Yes	No
Average Ticket	\$	Next Day Funding:	Yes	No
High Ticket	\$	Tip Edit:	Yes	No
First two sections must equal 100% respectively		EBT: Yes No FNS Number:		
Card Swiped: % Card Keyed In: % =100%	Tax Calculation: Yes No If so tax rate: %			
Card Present: % Card Not Present % =100%	Software or POS Integration Questions Only			
MOTO: % Internet: %	POS Software Integration: Yes No			
Traditional IBUX SimpleBux PrimeBux	Software Name & Version:			
Notes:		MP/AP Name:		
		RP Name:		
		Pricing Provided: Statement Analysis or Quote		
Receipt Header Message:				
Receipt Footer Message:				

