

First Grade

Attached Document Checklist

Voided Check

Copy of Drivers License

Fax to : 901-692-9499
email to:
applications@impactpays.net



Merchant Application Submission Form

Merchant (Business) DBA Name: T + G Trash Service

Business Legal Name: T + G Trash Service

Contact Name: Travis Smith Contact Phone Number: 615-218-1014

Physical Address: 7880 East Plunders Creek Rd City, State, Zip: Dickson, TN 37055

Phone Number: 615-218-1014 Fax Number:

Email Address: T.Smith@Impactpays.net Website:

Billing Address: City:

State: Zip:

Business Type

Corporation Business Start Date: 1-1-17

Limited Liability Business Type: Residential Trash Service

Sole Prop % of Business Owned: 100 % Length of Ownership: 2 1/2 years

Partnership Other Types of Goods Sold:

Federal Tax ID# Refund Policy?

Ownership Information

Officer/Owners Name: Travis Smith Title: Social Security: 411-45-4411

Home Address: 7880 East Plunders Creek Rd City, State, Zip Code: Dickson, TN 37055

Drivers License#: 092840565 Expiration Date: 7-25-26 State: TN

DOB: 5-30-83 Home Phone Number: 615-218-1014

Banking Information

Bank Reference (a copy of a voided check or a DDA verification letter from the bank is required)

Name of Bank First Federal Bank

City Dickson State TN Zip 37055

ABA Routing # 264171270

Account # 1463001239

Estimated Sales Volume	
Estimated Annual Sales (All sales)	\$
Estimated Visa/MC/Discover Sales	\$
Estimated Amex Sales	\$
Average Ticket	\$
**Highest Ticket	\$
% Card Swiped	%
% Card Keyed In	%
% Card Present	%
% Card Not Present	%
% MOTO	%
% Internet	%
% B2B	%
% International Cards	%

Terminal Questions

Batch Out Time:

Communication Method:

Dial IP-Internet

Do you dial 9 for outside line?

Terminal Type

Equipment Purchase

Equipment Replacement Program

PIN Debit Pin Pad

POS SOFTWARE

Software Name & Version:

Next Day Funding (Yes or No):

Tip Edit (Yes or No):

USA ePay Reader

Managing Partner

Managing Partner Name: Travis Smith

Date Submitted:

Date Received:	IC + :	PCI:	Minimum:
Date Keyed:	Trans Fee:	Statement:	Chargeback:
Date Approved:	AOF:	Gateway:	Return Item:

DRIVER LICENSE

USA
TN

Tennessee
THE VOLUNTEER STATE



DI. N.O. **092840565** DOB **05/30/1983**
EXP **07/25/2026** ISS 07/25/2018

CLASS D END NONE
REST NONE

SEX M HGT 6'-01" EYES BRO
DD 3201807251535127



SMITH
TRAVIS LEE
111 SOUTHWOOD DR

DICKSON, TN 37055-2723

Travis L. Smith