


Attached Required Document Checklist		Date	Fax to : 901-692-9499		
Voided Check	<input checked="" type="checkbox"/>	Submitted:	email to: applications@impactpays.net		
Business Verification Document	<input checked="" type="checkbox"/>	01/15/23			
Copy of Drivers License	<input checked="" type="checkbox"/>				
Merchant Application Submission Form					
Merchant (Business) DBA Name:	ATC Fitness				
Business Legal Name:	ATC FITNESS OF CORDOVA, INC	Website:			
Contact Name:	SPENNER MCDONALD	Contact Phone Number:	9012199488		
Physical Address:	8130 Malon Station Rd	City, State, Zip:	CORDOVA, TN 38018		
Email Address:	SPENNERM@atcfitness.com	Phone #:			
Billing Address:		City, State, Zip:			
Biz Phone #:		Biz Fax #:	EIN/Tax ID #:	26-2346019	
Business Type					
Corporation - Pick One:	Type:	Bus Open Date:			
Refund Policy:	Print Policy:	(If yes input refund message)			
Types of Goods Sold:	Gym				
Convenience Store					
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form					
Officer/Owners Name:	SPENNER MCDONALD	Title:	OWNER	Social Security:	409593290
Home Address:	4871 Walnut Grove Dr	City, State, Zip Code:	MEMPHIS TN 38117		
Drivers License#:	086304311	Exp Date:	9/10/2028	State Issued:	TN
DOB:	7/1/1980	Home Phone#:			
% of Business Owned:	100 %	Length of Ownership:			
Banking Information ** No starter checks or deposit slips accepted**			Terminal Questions (Circle your answer)		
Name of Bank	SIMMONS BANK	Batch Out Time (for nextday funding 7:00 PM):	12:00am		
ABA Routing #	082900432	Communication Method:			
Account #	132149712	Do you dial 9 for outside line? :			
Estimated Sales Volume			Terminal Type:		
Estimated Annual Sales (All sales)	\$ 4,000	Reprogram Terminal:			
Estimated Visa/MC/Discover Sales	\$	Equipment Purchase:			
Estimated Monthly Visa/MC/Discover/ AMEX Sales	\$	Equip. Rental Program:			
Average Ticket	\$	Next Day Funding:			
High Ticket	\$	Tip Edit:			
First two sections must equal 100% respectively			EBT:	FNS Number:	
Card Swiped: %	Card Keyed In: % = 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:			Software Name & Version:		
Notes:			MP/AP Name:		
			RP Name:		
			Pricing Provided:		
Receipt Header Message:					
Receipt Footer Message:					