


Attached Required Document Checklist		Date Submitted:	Fax to: 901-692-9499		Version: 005
Voided Check <input type="checkbox"/>	Business Verification Document <input type="checkbox"/>	email to: applications@impactpays.net			
Copy of Drivers License <input type="checkbox"/>					
Merchant Application Submission Form					
Merchant (Business) DBA Name: <i>Driftstone Pueblo INC.</i>					
Business Legal Name: <i>"</i>					
Contact Name: <i>Mike McCall</i>		Contact Phone Number: <i>618-267-7457</i>			
Physical Address: <i>702 West Perry Rd.</i>		City, State, Zip: <i>St. Elmo, IL, 62458</i>			
Phone Number: <i>618-829-3158</i>		Fax Number: <i>618 829 3159</i>			
Email Address: <i>driftstonepueblo@yahoo.com</i> Website: <i>com</i>					
Billing Address: <i>Somas ABUJ.</i>				City: <i>St. Elmo</i>	
State: <i>IL</i>		Zip: <i>62458</i>			
Business Type					
Corporation - circle one: <input checked="" type="radio"/> Private or Public			Business Start Date: <i>1991</i>		
LLC - circle one: C corp <input type="checkbox"/> <input checked="" type="checkbox"/> S corp P partner D disregarded entity			Refund Policy: 30 days 60 days <input checked="" type="radio"/> Other None		
Sole Prop Other:		EIN/Federal Tax ID# <i>371401564</i>		Print Refund Policy on Footer: Yes No <i>Gift items</i>	
Partnership		Types of Goods Sold: <i>Gem Mineral Jewelry</i>		(If yes input message in notes)	
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form					
Officer/Owners Name: <i>Michael McCall</i> Title: <i>President</i> Social Security: <i>355727271</i>					
Home Address: <i>1990 N 100 St</i>			City, State, Zip Code: <i>Vandalia IL 62471</i>		
Drivers License#: <i>M2405447 2141</i>		Expiration Date: <i>5/17/2026</i> State: <i>IL</i>			
DOB: <i>05-17-1972</i>		Home Phone Number: <i>618 3268814</i>			
% of Business Owned: <i>100 %</i>		Length of Ownership: <i>since 2011 owned it all</i>			
Banking Information ** No starter checks or deposit slips accepted**			Terminal Questions (Circle your answer)		
Name of Bank: <i>Bank of Hillsboro</i>			Batch Out Time:		
ABA Routing #: <i>081904798</i>			Communication Method: IP-internet or Dial-phone		
Account #: <i>5246010</i>			Do you dial 9 for outside line? Yes No		
Estimated Sales Volume			Terminal Type:		
Estimated Annual Sales (All sales) <i>Jan-Feb \$ 1.5mil</i>		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 \$ <i>1K</i>		Next Day Funding: Yes No			
High Ticket \$ <i>60K</i>		Tip Edit: Yes No			
First two sections must equal 100% respectively			EBT: Yes No FNS Number:		
Card Swiped: <i>100 %</i> Card Keyed In: % = 100%		Tax Calculation: Yes No If so tax rate: %			
Card Present: <i>100 %</i> Card Not Present % = 100%		Software or POS Integration Questions Only			
MOTO: % Internet: %		POS Software Integration: Yes No			
<input checked="" type="radio"/> Traditional IBUXX SimpleBuxx PrimeBuxx		Software Name & Version:			
Notes: <i>Phone Line Terminal</i>		MP/AP Name:			
<i>2 Terminals - w/500 & w/100</i>		RP Name:			
		Pricing Provided: Statement Analysis or Quote			
Receipt Header Message:					
Receipt Footer Message:					