

Attached Required Document Checklist

Voided Check   
Business Verification Document   
Copy of Drivers License

Date Submitted: 8/29/24

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



Version: 005

Merchant Application Submission Form

Merchant (Business) DBA Name: Doyle Plumbing  
Business Legal Name: Doyle Plumbing LLC  
Contact Name: J.R. Doyle Contact Phone Number:  
Physical Address: 171 Sycamore Rd City, State, Zip: Collierville TN 38017  
Phone Number: 901-317-5314 Fax Number:  
Email Address: Plumbing.JR@gmail.com Website:  
Billing Address: Same City:  
State: Zip:

Business Type

Corporation - circle one: Private or Public  
LLC - circle one:  S corp  P partner  D disregarded entity  
Sole Prop Other:  
Partnership  
Business Start Date: 2021 3yrs  
Refund Policy: 30 days 60 days Other  None  
EIN/Federal Tax ID#: 87-1769545  
Types of Goods Sold: Plumbing Services  
Print Refund Policy on Footer:  
(If yes input message in notes)

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

Officer/Owners Name: James R Doyle Title: owner Social Security: 414-53-0202  
Home Address: 171 Sycamore Rd City, State, Zip Code: Collierville TN  
Drivers License#: 073256658 Expiration Date: 12/13/27 State: TN  
DOB: 12/14/74 Home Phone Number: 901-317 5314  
% of Business Owned: 100 % Length of Ownership: 3yrs

Banking Information \*\* No starter checks or deposit slips accepted\*\*

Terminal Questions (Circle your answer)

Name of Bank: Bank of Fayette County Batch Out Time: 6pm  
ABA Routing #: 084304337 Communication Method: IP-internet or Dial-phone  
Account #: 10288635 Do you dial 9 for outside line? Yes No

Estimated Sales Volume

Terminal Type:

Estimated Annual Sales (All sales) \$600K  
Estimated Visa/MC/Discover Sales \$  
Estimated Monthly Visa/MC/Discover/AMEX Sales \$  
Average Ticket \$900  
High Ticket \$7K  
Reprogram Terminal: Yes  No  
Equipment Purchase: Yes  No  
Equipment Rental Program: Yes No  
Next Day Funding:  Yes No  
Tip Edit: Yes  No

First two sections must equal 100% respectively

EFT: Yes No FNS Number:

Card Striped: 99 % Card Keyed In: 1 % = 100%  
Card Present: 99 % Card Not Present 1 % = 100%  
Tax Calculation: Yes No If so tax rate: %

Software or POS Integration Questions Only

MOTO: % Internet: %  
Traditional  IBUXX SimpleBuxx PrimeBuxx  
POS Software Integration: Yes No  
Software Name & Version:

Notes: 3.5%  
IBUXX mobile device  
Rocket Valor  
MP/AP Name: Tricia Wright  
RP Name: Bank of FC  
Pricing Provided: Statement Analysis or Quote

Receipt Header Message:  
Receipt Footer Message: