


Attached Required Document Checklist		Date	Fax to : 901-692-9499		Version:007.16		
Voided Check	<input checked="" type="checkbox"/>	Submitted:	email to: applications@impactpays.net				
Business Verification Document	<input checked="" type="checkbox"/>						
Copy of Drivers License	<input checked="" type="checkbox"/>						
Merchant Application Submission Form							
Merchant (Business) DBA Name:		Arctic Clear Bottled Water					
Business Legal Name:		Arctic Clear Bottled Water			Website:		
Contact Name:		Jeff Maness		Contact Phone Number:		901.299.0700	
Physical Address:		3935 Herons Landing Lane			City, State, Zip:		Lakeland, TN, 38002
Email Address:		jsmaness@comcast.net			Phone #:		901.382.2363
Billing Address:		PO Box 159			City, State, Zip:		Arlington, TN 38002
Biz Phone #:		901.382.2363		Biz Fax #:		EIN/Tax ID #:	62-1839536
Business Type							
Corporation - Pick One:		Private	Type:	Bus Open Date:		01/01/2001	
Refund Policy:				Print Policy:		(If yes input refund message)	
Types of Goods Sold: Bottled Water & Coffee							
Ownership Information (Must be 51% or more) if multiple owners fill out additional ownership form							
Officer/Owners Name:		James J Maness		Title:		OWNER	
Home Address:		3935 Herons Landing Lane		City, State, Zip Code:		Lakeland, TN, 38002	
Drivers License#:		63490181		Exp Date:		11.30.2025	
DOB:		02.04.1968		Home Phone#:		901.299.0700	
% of Business Owned:		100 %		Length of Ownership:		23 yrs. 7 mo.	
Banking Information ** No starter checks or deposit slips accepted **				Terminal Questions (Circle your answer)			
Name of Bank:		Bank of Bartlett		Batch Out Time (for nextday funding 7:00 PM):			
ABA Routing #:		084003159		Communication Method: Dial (Phoneline) <i>W1-t.</i> <input checked="" type="checkbox"/>			
Account #:		082012568		Do you dial 9 for outside line? NO <input checked="" type="checkbox"/>			
Estimated Sales Volume				Terminal Type:			
Estimated Annual Sales (All sales)		\$215,000		Reprogram Terminal:			
Estimated Visa/MC/Discover Sales		\$30,000		Equipment Purchase:			
Estimated Monthly Visa/MC/Discover/ AMEX Sales		\$2500		Equip. Rental Program:			
Average Ticket		\$125.00		Next Day Funding: <input checked="" type="checkbox"/>			
High Ticket		\$1000.00		Tip Edit:			
First two sections must equal 100% respectively				EBT: . FNS Number:			
Card Swiped: 0 %		Card Keyed In: 100 % = 100% 100 <input checked="" type="checkbox"/>		Tax Calculation:		If so tax rate:	
Card Present: 0 %		Card Not Present 100 % = 100% 100 <input checked="" type="checkbox"/>		Software or POS Integration Questions Only			
MOTO: %		Internet: %		POS Software Integration:			
Program Type:				Software Name & Version:			
Notes: <i>email - receipt Ibuyx 395</i> <i>B2B - 85%</i>				MP/AP Name:			
				RP Name:			
				Pricing Provided:			
Receipt Header Message:							
Receipt Footer Message:							