



## Merchant Preliminary Application

Business Legal Name: \_\_\_\_\_ DBA: \_\_\_\_\_

Legal Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

DBA Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

DBA Phone: \_\_\_\_\_ Website: \_\_\_\_\_ Email: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_ TID Type (Check Box): SS# \_\_\_\_\_ EIN \_\_\_\_\_

Entity (Check Box): Sole Prop \_\_\_\_\_ Partnership \_\_\_\_\_ LLC \_\_\_\_\_ Non-Profit \_\_\_\_\_ Corp \_\_\_\_\_ Business Location: Store Front \_\_\_\_\_ Office \_\_\_\_\_ Home \_\_\_\_\_

Primary Legal Signor Full Name: \_\_\_\_\_ Title: \_\_\_\_\_ Cell: \_\_\_\_\_

% of Ownership: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ DL#: \_\_\_\_\_ Email: \_\_\_\_\_

Primary Signor's Physical Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Second Legal Signor Full Name: \_\_\_\_\_ Title: \_\_\_\_\_ Cell: \_\_\_\_\_

% of Ownership: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ DL#: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Signor's Physical Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Yrs in business/# of locations: \_\_\_\_\_ / \_\_\_\_\_ Currently accepting credit card payments: \_\_\_\_\_ Merchant Services Provider Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Do you have (Check Box): WIFI \_\_\_\_\_ LAN \_\_\_\_\_ Phone Line \_\_\_\_\_

Business Type: \_\_\_\_\_ Product/Services Sold: \_\_\_\_\_

Gross Annual Sales: \$ \_\_\_\_\_ Annual Credit Card Sales: \$ \_\_\_\_\_

Average Credit Card Amount: \$ \_\_\_\_\_ Highest Credit Card Amount: \$ \_\_\_\_\_

How is transaction completed (Enter %): \_\_\_\_\_ % Swiped \_\_\_\_\_ % Keyed \_\_\_\_\_ % Internet/Website

Bank Name: \_\_\_\_\_ Bank Phone: \_\_\_\_\_

Deposit Bank Routing#: \_\_\_\_\_ Bank Account #: \_\_\_\_\_

### Terminal/POS Type:

Clover POS ( ) Clover Flex ( ) Clover Mini ( ) Clover Duo ( ) Other ( ) PayLink ( ) SwipeSimple ( ) EMV Terminal ( )

Opt into Cash Discount? Yes ( ) No ( ) Purchase Device / No Agreement ( ) Free Device / 3yr agreement ( )

**Return preliminary application along with voided check, DL/ID, business license & Tax ID certificate to  
JaimePOS by E-mail: [Sales@JaimePOS.com](mailto:Sales@JaimePOS.com) or by Text: 702.843.0161**

Information within this form will be used to generate your legal application via DocuSign for your signature.

[www.JaimePOS.com](http://www.JaimePOS.com)

