

## **Business Startup: Intake Form**

Please submit the following information via this form.				DATE OF REGISTRATION	
PERSONAL II	NFORMATION				
Name Prefix :	Mr. Ms.	Othe	er		
First :		Middle :		Last :	
Email :			Phone :		
ADDRESS					
Street Address :					
Address Line 2 :					
City:			State/Province/Re	gion :	
ZIP/Postal Code :			Сог	untry :	

## **BUSINESS INFORMATION**

Business Name : Please enter the desired full legal business name including punctuation and the entity suffix (LLC, Inc., etc.)					
Business Entity Type :					
Corporation					
Limited Liability Company (LLC)					
General Partnership					
Limited Partnership					
Limited Liability Partnership (LLP)					
Business DBA ("Assumed Name") The name the business goes by other than its legal name, if applicable.					
BUSINESS ADDRESS					
Street Address :					
Address Line 2 :					
City: State/Province/Region:					
ZIP/Postal Code : Country :					
Business Phone Number : Business Fax Number :					
Business Email Address : Business Website :					

Professional Organization
Will this a professional business organization? If a business will primarily be offering professional services (those provided by doctors, dentists, veterinarians, engineers, architects, accountants, attorneys, etc.), it must be set up as a professional entity.
Yes
No
Professional Services
What type of professional services will be offered?
Business Owners and Officers
Please list each person's address and title in the business next to their name.
Registered Agent
The registered agent may be any owner or officer of the company.

## **REGISTERED OFFICE ADDRESS**

The registered office may be any physical address in Kentucky (not a P.O. Box).

Street Address :			
City:		State/Province/Region:	
ZIP Code:			
<b>Date Business Sta</b>	rted		
Approximate date the	business started or will start at this location	n.	
Business Activities	s		
	what the business does, or which industry	it is in	
uonoral accomplicit of			
Products Sold			
Products sold in Kentu	icky if applicable		
Troducts sold in Renta	eky, ii applicable.		
<b>Existing Business</b>			
Did you acquire the bu	siness from a previous owner?		
Yes			
No			

Other Businesses
Do you have other businesses in Kentucky?
Yes
No
Method of Federal Taxation
If the business is a LLC and you did not file an election to change the method of federal taxation, it is taxed as a Sole Proprietorship if there is only one owner and a Partnership if there are multiple owners.
Sole Proprietorship
Partnership
Corporation
S-Corporation
Annual Accounting Period / Tax Year
Calendar Year
Fiscal Year
Other
Responsible Party
The responsible party controls, manages, or directs the applicant entity and the disposition of its funds and assets. The IRS describes it in greater detail here: https://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/Responsible-Parties-and-Nominees The responsible party may be an individual, in which case we will need the individual's full name and social security number. We will not use the responsible party's social security number for any other purpose and will keep it strictly confidential. The responsible party may be another business entity, in which case we will need the business' name and EIN.
Responsible Party Tax ID
The responsible party's SSN or EIN.
Status of Employees
Does the business have employees?
Yes
No

Do you have or expect to have any employees who will receive W-2 forms in the next you issued by an employer to his or her employees showing taxes (federal income tax, Social vast majority of businesses with employees must file W-2s. See an example of a W-2 here	al Security, Medicare) deduced from their pay. The
Yes	
No	
Zoning Registration  Have you registered with the local building or zoning inspector?	
Trave you registered with the total building of 2011ing inspector.	
Yes	
No	
Additional Information	
Please include any additional information you would like our attorneys to know.	
Disclaimer  Our team may review the information you provide for the purposes outlined on this web us doesn't mean we're entering into any legal engagement with you.	osite. However, using this form to communicate wit
I Agree	
I Do Not Agree	
_	Signature

**Employees Receiving W-2 Forms**