

License Research Order Form General Application

BUSINESS ENTITY INFORMATION

LICENSING CONTACT PERSON:				
Name: Email:	Name: Email:		Title:	
Entity Name:				
WHAT TYPE OF BUSINESS ENTITY ARE YOU?				
	C-Corporation	S-Corporation	Limited Liability Company	
	If a corporation or LLC: St	tate of Organization:	Date of Organization:	
	Partnership	Sole Proprietor	Other:	
List all cities, counties, and states you would like us to research for you:				
List all physical locations of business and indicate whether you will have employees there:				
Industry:				
Provide a detailed description of all of your business activities:				

Will the client have employees at the location(s) to be researched?

Yes, employees at all locations No, no employees at any locations Employees at some locations

Will th	e entity be conducting business under a name other than its legal name?
	No Yes, using the following name in all locations: Yes, but only in some locations
6-Digi	t NAICS Code(s): (code descriptions are available online at www.naics.com/search.htm)
Will th	e entity be conducting business in any of the following industries? (Check all that apply)
	Energy Industry (Natual gas, electricity, solar, etc.) Construction Security Retail Hotel/Motel Health Care