



Business Shareholder Information

Business Name: _____

Doing Business As (if other than above): _____

Physical Address: _____

Mailing Address: _____

Phone Number: _____ Fax Number: _____

Federal ID: _____ Website: _____

Who is the business owned by? _____

Type of Business: _____ When was your company established? _____
(corporation, partnership, etc.)

Please submit one of the following documents _____ Current Local Business License

_____ Current Utah Department Of Commerce Registration

What is the nature of your business? _____

<h3>Officers</h3>

<u>Name</u>	<u>Title</u>	<u>Phone</u>	<u>Email</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Primary Contact Name: _____ Title: _____

Email: _____ Phone: _____

Billing Contact Name: _____ Title: _____

Email: _____ Phone: _____

Send Statements To: _____ Business Address

_____ Approved Business Designee