

BusinessBuilder™ Questionnaire

Name of Business _____

Name of Owner _____ Name of Owner _____

Address of Business _____

Telephone (____) _____ Fax (____) _____ Cell (____) _____

Type of Business:

- Retail Manufacturing Import/Export Restaurant
 Realty Construction Hospitality Other _____

Type of Ownership:

- Proprietorship Partnership Incorporation

Does your company have inventory? If yes please provide a list of inventory.

- Yes No

Is there currently any loans or line of credit with your business?

- Yes No

Which bank is your business account with?

Name of Bank: _____

Name of Bank: _____

Do you have any credit cards for the purpose of business?

- Yes No

If yes, which company(ies) do you have them with?

- Visa Mastercard Discover American Express
 Retail _____ Gas _____

BusinessBuilder™ Questionnaire

Does your company have employees?

- Yes No

If yes, how many?

Will your company need payroll done?

- Yes No

Does your company have Assets?

- Yes No

If yes, please list all assets with their value:

Name of Asset	Value
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Has your company currently have bookkeeping completed?

- Yes No

If yes, does your company have a current balance sheet and income statement?

- Yes No

What remittances and forms is your company required to remit? Please check all that apply.

- GST PST WCB Payroll Deductions
 T5018's T4's ROE's Other _____