



# Cruise & Associates, Inc.

## Business Client Information



Business Name \_\_\_\_\_ Primary Owner \_\_\_\_\_

D B A \_\_\_\_\_

Federal ID # \_\_\_\_\_ State UC # \_\_\_\_\_

State ID# \_\_\_\_\_ Fiscal Year End \_\_\_\_\_

Describe Business \_\_\_\_\_

Address \_\_\_\_\_ Business Phone \_\_\_\_\_

City \_\_\_\_\_ Home Phone \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Fax \_\_\_\_\_

Business Type \_\_\_\_\_ Sole P \_\_\_\_\_ Partnership \_\_\_\_\_ S-Corp \_\_\_\_\_ C-Corp \_\_\_\_\_ LLC (Type \_\_\_\_\_)

Are you within the city limits? \_\_\_\_\_ Yes \_\_\_\_\_ No Which city: \_\_\_\_\_

Please enter the number of owners \_\_\_\_\_ # of Employees \_\_\_\_\_ Payroll frequency \_\_\_\_\_

Owner's Name	Social Security #	Date of Birth	Ownership %	Months

Would you like your return copies to be \_\_\_\_\_ Paper \_\_\_\_\_ CD \_\_\_\_\_ E-Mailed?

Initial here to opt out of text appointment reminders. \_\_\_\_\_

### How did you hear about Cruise & Associates?

\_\_\_\_\_ Telemarketer

\_\_\_\_\_ Former/Returning Client

\_\_\_\_\_ Yellow Pages (Which Book: \_\_\_\_\_)

\_\_\_\_\_ Direct Mailer

\_\_\_\_\_ Chamber/Networking

\_\_\_\_\_ Referral (By Whom: \_\_\_\_\_)

\_\_\_\_\_ Email Newsletter

\_\_\_\_\_ Social Media \_\_\_\_\_ Facebook \_\_\_\_\_ LinkedIn \_\_\_\_\_ Twitter

\_\_\_\_\_ Online Ad/Marketing

\_\_\_\_\_ Website

\_\_\_\_\_ Workshop/Seminar

\_\_\_\_\_ Other \_\_\_\_\_

I/we represent that all the above information is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

Date \_\_\_\_\_