

COMMERCIAL FORM

Business Name

Contact Name: First M. I. Last

Mailing Address

City State Zip

Phone #1 Phone #2

FAX Email

Web Site

DATE ESTABLISHED

<input type="checkbox"/>	Service	EMPLOYMENT INFORMATION
<input type="checkbox"/>	Skilled Trades	
<input type="checkbox"/>	Manufacturing	
<input type="checkbox"/>	Sales and Marketing	
<input type="checkbox"/>	Clerical and Administrative Support	
<input type="checkbox"/>	Managerial and Professional Specialty	
<input type="checkbox"/>	Other <input type="text"/>	
<input type="checkbox"/>	Total	

JOB AVAILABILITY Openings?

Job Description

Contact Phone

Application Due Date

Job Description

Contact Phone

Application Due Date

SPACE INFORMATION	Sales Space	<input type="text"/>	sq. ft.	
	Office Space	<input type="text"/>	sq. ft.	
	<input type="checkbox"/> Own Business Space	Production Space	<input type="text"/>	sq. ft.
	<input type="checkbox"/> Rent Business Space	Storage Space	<input type="text"/>	sq. ft.
		Unused Space	<input type="text"/>	sq. ft.
		Total Space	<input type="text"/>	sq. ft.

COMPETITIVE EDGE

PRIMARY PRODUCTS AND/OR SERVICES

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

BUSINESS CLASSIFICATION

Description

NAICS Code SIC Code

BUSINESS HOURS	Open	Close
Sunday	<input type="text"/>	<input type="text"/>
Monday	<input type="text"/>	<input type="text"/>
Tuesday	<input type="text"/>	<input type="text"/>
Wednesday	<input type="text"/>	<input type="text"/>
Thursday	<input type="text"/>	<input type="text"/>
Friday	<input type="text"/>	<input type="text"/>
Saturday	<input type="text"/>	<input type="text"/>