

Form

General Business Information

Company Name::			Contact Name:	
Company Number:			Contact Number:	
Company Number:			Contact Email:	
Type of business:			Web address:	
Describe what your company is about and list the main products and/or services offered:				
What is unique about your products or services? What is your competitive edge?(List all that apply):				
What industry is your o	company in?			
Who is your target market/audience? (Age, interest, income range, occupation, etc Be specific and detailed):				
Who are your competitors?:				