



Business name:		Business address:		Issued EINumber: _____ -04	
Type of business: <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Private corporation <input type="checkbox"/> Joint venture <input type="checkbox"/> Government (specify) _____ <input type="checkbox"/> Others (specify) _____ <input type="checkbox"/> Profit <input type="checkbox"/> Non-profit *if non-profit <input type="checkbox"/> with payroll <input type="checkbox"/> without payroll <input type="checkbox"/> Domestic/local <input type="checkbox"/> Foreign _____		Telephone number:		Fax number:	
		E-mail address:			
		If applicable, affiliated companies/owner(s) and contact(s): _____ _____ _____ _____			
Business description: for ex. Retail/restaurant etc.					
Name of owner(s) and officer(s)		Position title		Nationality	
SS number					
1. _____		_____		_____	
2. _____		_____		_____	
3. _____		_____		_____	
4. _____		_____		_____	
Note: If it is a Corporation, please include name of the Chairman or incorporator of the organization.					
Contact person: (Accountant/General Manager/principal owner)			Position title		Contact number
Name and nationality of Non-Marshallese partner(s) if any: _____					
Date business will or has commenced:		Number of employee(s): Regular _____ Part-time _____			Annual gross revenue: <input type="checkbox"/> \$10,000 or less <input type="checkbox"/> more than \$10,000
Certified correct: _____					
Print name		Signature		Position title	
Date					
Attachments: <input type="checkbox"/> Photo ID of owner(s)/General Manager or Board Chairman/ incorporator(s) <input type="checkbox"/> Detailed sketch of business location <input type="checkbox"/> Roster of employees (if business has started already) <input type="checkbox"/> Corporate charter (if corporate business) <input type="checkbox"/> Foreign Investment Business License (FIBL-if foreign company)			For official use only: Business Type: _____ Standard Industry Code (SIC): _____ <input type="checkbox"/> non-profit and without payroll APPROVED BY: _____ <div style="display: flex; justify-content: space-between;"> Print name and sign Date </div>		