

# TIMOTHY MAHI'AI WHITE

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# CONFIDENTIAL BUSINESS FORMATION INTAKE FORM

PLEASE FILL OUT THIS CONFIDENTIAL FORM AS COMPLETELY AND ACCURATELY AS POSSIBLE. THIS INFORMATION WILL BE USED TO FILE THE REQUIRED DOCUMENTS TO FORM YOUR BUSINESS ENTITY.

PLEASE RETURN THIS FORM TO ME UPON COMPLETION TO GET THE MOST OUT OF YOUR CONSULTATION.

## I. About You:

Your Full Legal Name:	
Other names used in past:	
Street Address: County:	
Mailing Address if different:	
Phone: Home ( ) Cell ( )	Work ( )
Email Address:	
I authorize emails concerning my case I authorize emails and mailings of general interest fi May we contact you concerning your case via: Pho	
Preferred Method(s) of Contact:Employer:	
Monthly Income Amount: Other S	Source of Income:
Date of Birth:	SSN#
Driver's License#:	Expiration Date:
Marital status:	US Citizen? yes no
If married, do you live with your spouse? yes no	
Do you have a prenuptial, postnuptial, or cohabitation ag	reement? yes no
If you have children, are you subject to a court order for	support?YesNo
Are Payments Current?Yes No	
Have you been in business for yourself or with a partner	
Are you currently in business for yourself or with a partr	ner? YesNo
a) the form of entity, (b) whether or not the business	s, please write below the details of the business: including is currently in operation or was officially dissolved, (c) the business has been in operation, (e) the type of business

## II. About the Business You Would Like to Form:

<b>A.</b> What type of busine	ess do you desire to form?	
□ Sole Proprietorship	□ General Partnership	☐ Limited Liability Partnership
☐ Limited Partnership	□ Corporation	
□ I don't know		
<b>B.</b> The state in which yo	u desire to form the business:	
List any other states in w	hich you want the business to be qu	ualified to do business:
C. Financing Your Bus	siness	
What will you contribute	e to the business in the way of startu	p capital or property?
1. Capital (cash or o	other liquid assets):	
2. Real property (la	nd or buildings):	·····
3. Personal property	/ (include furniture, equipment, auto	omobiles, and other tangible property:
Are you interested in attr	racting investors?	
D. Ownership Interest(	s) & Roles	
What will your relations	hip be to the business?	
What active role (if any)	will you play in the business (what	are your duties):
each person listed, incl		pect will have an ownership interest in the business. For ntribution and (2) his or her role (how will he or she
Full legal name(s), addreshares, units or percentage.		the owner(s) of the business and their amount of
2.		
3.		
	officers you wish to elect, if applications sident, Secretary, Treasurer, etc.):	able, with their appropriate title next to their name
2.		
3.		
4.		

E. Name(s) for Business & Activities:	
What name do you plan to use to conduct your business?	
1. Do you plan to use a different name to form your business? Yes No	
2. If so, what is the name you want to use to form your business?	
3. If your 1st choice is not available, please select an alternative:	
Desired effective date of formation of business:	
Brief description of business activities (i.e., goods/ services sold, profession etc.):	-
Will your business operate for profit? Yes No	
Will you be selling products/services to the end-user? Yes No	
1. If not, who will your products/services be sold to?	
Have you consulted with any government agencies, business organizations, or incubators to develop a busin your proposed business? If so, please list the organizations or government agencies with which you have worked:	ness plan for
Do you have a business plan? Yes No	
If you have a business plan, please bring it with you to your initial consultation or strategy session	
F. <u>Location:</u>	
1. Will you have a home office for your business? Yes No	
If so, will you meet with clients or customers in that office? Yes No	
2. Will your business be web-based? Yes No	
3. Will you have a storefront or other commercial location for your business? Yes No	o If so,
have you researched a location to determine availability and cost? Yes No	
4. Do you know about the zoning requirements for your chosen location? Yes No	
5. Are you aware of the tax implications for your location: Yes No	
<b>6.</b> What is the Business address (including zip code)?	
7. If web-based, where will the business operations take place?	 _
8. Do you plan to do business outside of Hawaii involving a physical presence in the other	jurisdiction (in
other words, will you travel to perform any work outside of Hawaii)? Yes No	
<ul><li>9. Do you plan to conduct business (take orders or provide services) via telephone? Yes _</li><li>10. Who will be your registered agent (and their address/phone/email) for service of process in t any litigation?</li></ul>	

### III. Risk exposure/tolerance:

**A.** Have you researched your proposed business to determine the types of risks that may be involved? **B.** Are you comfortable with having your personal assets exposed to potential claims from customers, suppliers, or others with whom you will be doing business? \_\_\_\_\_ Yes \_\_\_\_\_ No **C.** Are you aware of the following types of business insurance? \_\_\_ Yes \_\_\_ No \_\_\_ Yes \_\_\_ No Key person insurance Flood insurance \_\_\_ Yes \_\_\_ No Business interruption insurance \_\_\_ Yes \_\_\_ No Malpractice insurance \_\_\_ Yes \_\_\_ No Cyber insurance \_\_\_\_ Yes \_\_\_\_ No Errors and omissions insurance **D.** Have you researched the costs of business owner (liability and casualty) insurance for your particular business? \_\_\_ Yes \_\_\_ No IV. Other Considerations: A. Do you desire flexibility in the operation of your business? \_\_\_\_ Yes \_\_\_\_ No **B.** Do you want your business to continue, even if you are no longer able to be involved? Yes No **C.** Do you plan to take a regular salary from the business? Yes No **D.** Do you plan to hire other employees for your business, either now or in the future? \_\_\_ Yes \_\_\_ No E. Do you plan to hire independent contractors for your business? \_\_\_\_\_ Yes \_\_\_\_ No F. Do you expect to have any employees within the next 12 months? If so, how many, and what date do you expect to first pay them wages: \_\_\_ G. Do you desire to expand your business and eventually, issue stock in your company to the public? \_\_\_\_ Yes \_\_\_\_ No **H.** How do you plan to manage the business: (1) Do you want to manage your company as a member or as a manager? (2) Will you share management responsibilities with anyone? (3) Do you plan to delegate any significant responsibilities to anyone who will not have an ownership interest in your business? (4) Have you developed a management scheme? If yes, please describe below: **I.** Do you have any experience with business accounting? \_\_\_ Yes \_\_\_ No J. Do you plan to work with an accountant to set up your business accounts? \_\_\_ Yes \_\_\_ No **K.** Do you have a tax advisor or do you plan to work with one? \_\_\_\_ Yes \_\_\_\_ No L. What are your tax objectives (some general tax information may be discussed, but you need to consult a tax professional to ensure your tax objectives are met): I want to be taxed like: □ Sole Proprietorship □ Partnership □ Corporation □ I don't know Please explain any other tax objectives here: **M.** I want my accounting period to be based on (pick one): □ Calendar Year ☐ Fiscal Year (with the ending month being: \_\_\_\_\_)

N. I want my Accounting method to be (pick one):  □ Cash □ Accrual
<ul><li>O. Who will be responsible for filing and dealing with taxes?</li><li>P. Do you know how you want profits and losses distributed? If yes, please describe here:</li></ul>
Q. If there is a disagreement among the owners of the business, would you consent to mediation or arbitration as a first step or a binding determination to resolve the dispute as an alternative to traditional litigation? Yes No R. If one of the owners wants to sell his or her interest in the business, should the other owners have the opportunity to purchase that interest before it is offered to others? Yes No S. Do you understand the importance of keeping your personal assets separate from your business assets if you form a corporation or limited liability company/partnership? Yes No T. Have you discussed the types of policies and procedures you would want to include in your operating document (such as decision making, authority, management, dissolution, buying or selling business, confidentiality etc) Yes No
U. What branding or other intellectual property considerations are important to you?
V. Will you require ongoing legal services? If yes, please describe:
Q. Once up and running are you concerned about:
□ remaining in compliance with the law □ having properly drafted contracts □ cybersecurity
□ having contracts with 3 <sup>rd</sup> parties reviewed □ enforcement of internal operations □ ability to ask legal questions as issues arise □ employment contracts
□ opening a bank account □ establishing credit for your business
□ marketing & available business resources □ Other
<b>R</b> . Any other concerns or factors you feel are pertinent:
V. Please Classify Your Urgency in Pursuing this Matter: (check one)
□ <b>Critical</b> – Personal safety or continuation of business depends on it; I have to be in court tomorrow.
$\label{eq:Very Important} \ - \ Severe \ hardship, personal, or financial inconvenience, if not resolved quickly.$
□ <b>Important</b> – Matter interferes with business or personal financial stability.
□ Needs to be done, but no immediate hardship or rush.
☐ Just thought I'd see if it was worth pursuing, but <u>not</u> ready to hire an attorney at this time.
☐ Just thought I'd see if it was worth pursuing and I am ready to hire an attorney.
□ Just wanted some information, I will get back to you if I decide to pursue this.

# & SIGN BELOW: ☐ I have completed this form as fully and accurately as possible and have not knowingly provided any false statements. ☐ I understand that to make the most out of my session, I should return this form at least 48 hours before my appointment. ☐ I understand that this form is for informational and assessment purposes only and is not a contract for legal services and does not constitute an agreement to represent me. Representation, if so desired, shall be provided upon

PLEASE ACKNOWLEDGE EACH OF THE FOLLOWING IMPORTANT STATEMENTS

the execution of a formal written I	egal Services	Agreement.	1	,	,
Signature			Date		