



Client Consultation Form

Client Information and Consent

Business

Name Business Type

Address

City Zip

Phone Email

BUSINESS INFORMATION

Yes No

1. Do you have a tracking system for collecting your customer's reviews/feedback? Yes No
2. Does your business require specific licensing/certification? Yes No
3. If your business requires specific licensing/certification, do you have this information ready to provide? *(Having this information may speed up the verification process so that we can list your business)* Yes No
4. Do you have other website or business listings? *(i.e. Google, Yelp, Amazon, Etsy, Pinterest, etc.)* Yes No
5. Do you have a current marketing plan? Yes No

What are your business or marketing concerns/goals?

1. <input type="text"/>	4. <input type="text"/>
2. <input type="text"/>	5. <input type="text"/>
3. <input type="text"/>	6. <input type="text"/>

I am aware that it is my duty to submit truthful information.

I agree to the terms of service:

I understand that all of businesses listed on our website through our Website Service Listing service are first required to be authenticated and are subject to a verification fee that will vary depending on the type of business.



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I agree:

I understand that the verification fee is non-refundable and non-negotiable.

I agree:

I understand that knowingly providing false or incorrect information and/or documents will result in termination of the service and you will be banned from doing further business with Tiffany Consultant Services LLC, and furthermore will be reported to any business ethics, state consumer bureau and/or BBB governing your business in your state.

Date

Officer's Name: _____

Client