## **2025 BUSINESS INFORMATION UPDATE FORM**

Business Name:			
	Primary Contact Inform	ation	
Name:			
Email Address:			
Phone Number:	Mobile Number:		
	Secondary Contact Inform	mation	
Name:			
Email Address:			
Phone Number:	Mobile Number:		
Did your Business m	ove in 2025? If so, please provide the new add	ress:	
Is this the same address as your mailing address:		YES	NO
If no, please provide	your updated mailing address:		
Did you purchase an	y new equipment in 2025?	YES	NO
If so, please provide	receipt(s).	-	
Did you purchase any new furniture/fixtures in 2025?		YES	NO
lf so, please provide i	receipt(s).		
Did you you make any major leasehold improvements in 2025?		YES	NO
lf so, please provide i	receipt(s).		
Do you have any W-2 employees?		YES	NO
Do you have any 109	9 NEC Subcontract workers?	YES	NO