

**INCORPORATING A BUSINESS – INFORMATION NEEDED**

a) Name you would like to choose for your business (subject to availability in WA State):

Choice #1 \_\_\_\_\_

Choice #2 (in case Choice #1 name is already in use)

\_\_\_\_\_

b) You can use other business names besides the main name mentioned above (one or more). Such extra names are called DBA (“doing business as”). Do you want to use any DBA name(s) for your business besides the name above?

Choice #1 (DBA) \_\_\_\_\_

Choice #2 (DBA) \_\_\_\_\_

c) Circle the corporate designation of your choice: **Corporation, Incorporated, Limited, Company,** or an abbreviation **Corp., Inc., Ltd., or Co.** (this abbreviation applies only to the main name in paragraph (a))

d) Total Number of shares (this can be any number, 100 for example): \_\_\_\_\_

e) Number of shares from line “c” above divided among all incorporators. The number of shares owned by each individual out of the total number of shares on line “c” reflects the percentage of ownership each shareholders has in the corporation:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

f) Registered agent. The Registered Agent receives license renewals and other notices and forwards them to the corporation. The agent also accepts legal papers served on the corporation. I can provide these services for \$89 per year. Please circle ‘Yes’ if you agree for me to be your registered agent.

Registered agent: James Christen    Yes    No

g) Name of each incorporator. These are the names of the owners of the corporation:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

h) Address of each incorporator:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

i) Company Telephone # \_\_\_\_\_

j) Date of Birth of each incorporator:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

k) Soc. Sec. # of each incorporator:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

l) If any incorporator is married, then provide spouse's name, DOB and SSN

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

m) Please assign corporate titles (corporate titles may be held by one incorporator or divided among all incorporators (President, Vice President, Secretary, Treasurer, Chairman, Director, Officer):

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

n) Do you or did you ever own another business in WA State? If Yes, please provide prior business name and UBI number:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

o) Do you plan to hire employees for your new business in the next 90 days? Yes No

p) If you answered Yes above, how many people do you plan to hire (besides owners) and how many hours (3 months estimate-full time for 3 months is approx 480 hours):

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q) Physical Address of the corporation (where the office of the corporation shall be located):

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r) Mailing address of the corporation (if different from the physical address):

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s) Short description of the type of activity/service your company will provide:

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t) Type of business activities in Washington State (please check all that apply):

- Wholesale
- Retail
- Manufacturing
- Services

u) If you will hire employees, what kind of work will they perform (clerical, caregivers, cleaning, etc):

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v) Do you want WA State Unemployment coverage for corporate officers/owners? Yes No

w) Do you want elective workers' compensation coverage for owners? Yes No

x) Date of first employment or planned employment at this location: \_\_\_\_\_

y) Previous UBI # and Federal Employment # (EIN): \_\_\_\_\_

z) Do you want the above UBI# to be closed? Yes No

aa) What is the estimated annual gross income for this business? \$\_\_\_\_\_

bb) Do you need a license(s) for the type of activity you will perform? (Please check with Washington State Department of Licensing). If Yes, what type of license(s) do you need?

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cc) Which bank do you plan to open a corporate account with and in which city?

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dd) E-mail address (which can be used for business purposes):

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ee) Telephone:

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Name of each incorporator

Signature

Date

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_