



City of Montgomery Business Questionnaire

Name of Business _____ FID/SS# _____

EMAIL Address _____

Montgomery Address _____ Phone# _____

Mailing Address _____ Phone# _____

Calendar Year End (12-31) _____ Fiscal Year End _____

Date Business Started In Montgomery _____ Employees, If Any _____

Weekly Payroll _____ Withholding for Employee's Convenience, only? (circle one) **Yes** **No**

Payroll Company _____ FID# _____

Address _____ Phone# _____

Leased Employees? (circle one) **Yes** **No**

Company Name _____ FID# _____

Address _____ Phone# _____

Type of Business: Sole Proprietorship _____ Corporation _____ Rental _____ Partnership _____ S-Corporation _____ LLC _____

Name of Officers/Partners _____ SS# _____

Manager/Contact Person _____ Phone# _____

SUBCONTRACTORS → Date Job Started _____ Job Site _____