**Business Plan Questionnaire**

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| Name:  *Phone*  *Email* |

**Type of Business**:

Service Merchandising Manufacturing

**Form of Business**:

Sole Proprietorship Partnership Corporation LCC Cooperative

**Facility:**

Brick & Mortar Online Both

**Business Name**

**Business Industry**

**Upstart or previously developed service/product?**

**Please explain your service or product and why you wish to provide this product/service to your consumers**.

**Please list your key strengths (what will make you stand out from competitors**)

**Please state what you would like to accomplish (what are your overall goals**)

\*Be as specific as possible, provide timelines

**Who is your target audience?**

\*we will develop this with research but we want your opinion

**List any other businesses/products you own or are invested in:**

**Is this a primary source of income or side business? Y N**

**Will your business be self funded or will you be seeking investors/loans?**

**Briefly explain your company background** (how you came up with the idea, when did you start, etc. \*We will use this information to develop your company history.

**Briefly explain the company structure** (\*how will your business will operate)