## **Company Name: DBA: Personal Info:** Officer/Member: Your Name: First Name Last Name SSN: Home Address: Street: City, State and Zip: Citizenship: Date of Birth: Place of Birth (City and State): Phone Number(s): Business: Cell: E-Mail: Contact Person for this Account

Location Address:	
Street:	
City, State and Zip:	
County:	
Business Type:	
Corp Type:	
Ownership %:	
Business Start Date:	
Store Hours:	
Master License Number:	
Number of Machines:	
NACIS	