

Town of Breckenridge Business Survey

1. Legal Entity Name _____

2. Name entity is doing business as in Breckenridge _____

3. Nature of the entity: Corporation Partnership Individual Proprietorship
 Other _____

4. Date Organized or Incorporated _____ State _____

5. Address of Principal Office: Street Address _____
City, State & Zip Code _____ Main Phone _____

6. Mailing Address (if different from above): _____
City, State & Zip Code _____ Main Phone _____

7. Date commenced business in Breckenridge _____

8. Description of business being conducted in Breckenridge.

9. Detail description of services and/or products you provide to customers in Breckenridge.

10. How often does someone visit Breckenridge from your company? Are your visits all year or seasonal, and if seasonal which months?

11. Do you contract for deliveries or other services in the Town of Breckenridge?

12. Contact information for person responsible for Breckenridge Business & Occupational activities, please include their email, address and phone number.

13. Does your business maintain its own records? Yes No
If no, please specify the outside accountant or contact person (name, address & phone number) who performs this service.

