Documents needed for a Salon or Barbershop:

Certificate of formation Copy of license Tax ID letter Fax: 888-959-0340

Name of owner/s:		
Business name:		
Cell:	Email:	
Address:		
Tax ID #:	Entity: LLC / Sole proprietor / Corp	
Describe services provid	ed:	
Annual gross sales:	Payroll:	# of employee's
Sq ft of location:	Value of equipment or material:	
Describe equipment or m	naterial:	
# of claims in the past:	(if applies please describe incident)	

