

Payroll & HR Services Information Sheet

Company Information

_____ Company Name	_____ Owner's Name & Title
_____ Doing Business As (if different than company name)	_____ Contact Person & Title (if not the owner)
Mailing Address:	Physical Address: (if different than mailing address)
_____ Street Address	_____ Street Address
_____ City, State Zip Code	_____ City, State Zip Code
_____ Phone Number	_____ Type of Business (Sole Prop., Partnership, LLC, Corp.)
_____ E-mail Address	_____ General Business Description

Business Identification

_____ How Many Years Doing Business	_____ State Business Identification Number
_____ Federal Employer Identification Number (EIN)	_____ CCB Number or Other Special License Number (optional)

Payroll Information

_____ (Estimated) Monthly Payroll	_____ When Does Your Pay Period Start	_____ Pay Cycle (Weekly, Bi Weekly, Monthly)
_____ Total Number of Employees	_____ When Does Your Pay Period End	_____ Pay Date (What Day is Pay Day)
_____ How Many Full Time Employees	_____ How is Payroll Delivered	_____ Reporting Day (if different than pay date)
_____ How many Part Time/Temp Employees	_____ Payment Type (Checks, Direct Deposit)	_____ Hourly Rate of Employees (\$/hour)

Additional Information

