



*The path for a better business
and a better life*

3775 Chestnut Street
P.O. Box 247
Emmaus, PA 18049
phone: 610.967.4711
fax: 610.965.7766
www.dstortz.com

BUSINESS OPERATIONS QUESTIONNAIRE

Client Name: _____ Date: _____

Name of Business: _____

Email Address: _____

Completed By: _____ Signature: _____

Describe the industries in which the company operates; please explain in detail below:

Describe the company's production process, please explain in detail below:

List each location maintained by the company and the nature of the activity carried on at each, e.g., plant, sales office, executive officers, etc.

Do you operate your business within PA only? Yes No

If yes, are you doing business in any NEW PA Localities, have you registered for Business Privilege Tax, if applicable?

If no, what other states are you operating /conducting business in? What services are you providing in those states?

Have you applied for the other states' required registrations and licenses? Yes No

Do you have employees working in states other than PA? Yes No

If yes, what states?

Do you have any internet sales? Yes No

If yes, are you billing and collecting sales tax on these transactions? Yes No

Do you buy goods online or from out of state vendors? Yes No

If yes, you may be required to pay PA use tax.

Did the corporation receive, sell exchange, gift, or otherwise dispose of any digital assets? Yes No