GRANVILLE-HAVENWOODS ADVISORY COUNCIL BUSINESS QUESTIONNAIRE

Date		

The Granville-Havenwoods Advisory Council reviews plans and proposals for redevelopment projects in the Granville-Havenwoods Development Area for consistency with the goals, needs, and desires of the Granville-Havenwoods community and its residents, businesses, property owners and other stakeholders. The Granville-Havenwoods Development Area is bounded by W. County Line Road, Good Hope Road, N. 43rd Street, and N. 107th Street. Additionally, the council would like to be informed of new businesses or developments coming into the Granville-Havenwoods Development Area or altering operations within the area. The council would like to review those businesses/developments and possibly offer recommendations or provide input on them. Any recommendations made by this council are advisory only to other required processes.

Please be prepared to present on your business or proposed business for roughly 5 minutes. If you are not confident in your command of English, please bring a translator with you. Applicants must meet with the local Council member prior to appearing at this meeting and may be moved to the next meeting date, if the meeting runs long.

Individual Name: INCLUDE ALIASES AND PRIOR NAMES
Email:
1. What is the legal name and D/B/A name of your business?
2. What is the address of your business or proposed business?
3a. Are you a new or existing business?
3b. How many years have you been in business?
4. Describe the product(s) or service(s) you offer. Include specific activities to be held at the proposed location. Include all licensing needed/applied for.
5. What problem does your business solve?
6a. How will you involve the community?
6b. How will you give back to the community?

7. What are the business hours of operation?
8. Who is your target audience?
9a. Why do you want your business to be located within the 9th district?
9b. How will your business improve the 9th district?
10. Who will maintain the exterior premise of your establishment?
11. Are you leasing or buying the building where your business will be located?
12. Describe your security design.
13. Does your proposal involve any City approvals? If so, what are those approval processes?
14. What is the project timeline or schedule for your development or business, including any City approvals that are required?
15a. Do you have a written business plan?
15b. Does your plan include a marketing plan?
15c. Are you doing financing? If yes, with whom?
15d. What is your plan on hiring and how many full/part-time employees?

15e. Are you going to hire within the community and how do you plan to recruit/train these individuals?
15f. What insurance coverage do you have?
16. If needed, have you contacted the Department of Public Works?
17. Do you have a contractor for plumbing, HVAC, and architect? If yes, who are they?
18. Have you obtained your seller's permit?
19. Have you registered with the Department of Financial Institutions?
20. Do you have an accountant and a lawyer? If yes, who are they?
21. Do you currently have any unpaid financial judgments against you personally or any businesses you are involved with and/or in?

GRANVILLE-HAVENWOODS ADVISORY COUNCIL INDIVIDUAL QUESTIONNAIRE

Date		

All individuals involved in the business must complete this form, including:

• sole proprietor

• all officers, directors, and agent of a corporation or nonprofit organization

• all partners of a partnership

• members and agent of a limited liability company

Your application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information										
1. Legal Business Name (individual name if sole proprietor)										
2. Business Trade Name or DBA										
3. Entity Ty	ype (check one)									
☐ Sol	e Proprietor 🗆	l Partnership	☐ Lim	ited Liabilit	y Compan	ıy	□ Corporation	– 1	Nonprofit	Organization
Part B:	Individual Infor	mation								
1. Last Na				2. First	Name	1				3. M.I.
4. Relationship to Business (Title) 5. Email			ıail	. <u> </u> 				6. Phone		
7. Home A	ddress									
71110111071	.a.a. 555									
8. City				9. State			10. Zip Code	11.	Date of Bir	th
12. Driver	License/State ID Numbe	er					13. Driver License/State ID State of Issu			:e
121 011101	License, Grate 15 Hambe				15. Diver Electise/State in State of issuance					
Part C.	Address History	,								
										Yes □ No
1. Do you	currently reside in Wisco	onsin:								Months
If yes to 1 above, how long have you continuously lived in Wiscons				nsin prior to t	he date of a	pplicatio	on?		Years	Months
2. List in c	hronological order all of	your addresses	within the last 5	years. Attach	additional	sheets if	necessary.			
Previous A	ddress 1			City	City			State	Zip Code	
Previous Address 2			City	City			State	Zip Code		
Previous Address 3			City	City			State	Zip Code		
Previous Address 4			City	City			State	Zip Code		
Previous Address 5			City	City			State Zip Code		!	
3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.										
State	County	State	County		State	Count	y	State	County	
State	County	State	County		State	Count	у	State	County	
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Continued **→**

Part D: Criminal History						
1. Have you ever been convicted of any offenses (excluding traffic offenses) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances?						
If yes to question 1, please list details of each conviction below. At	tach additional sheets as ne	eded.				
Law/Ordinance Violated	ance Violated Location		Conviction Date			
Penalty Imposed		Was sentence completed?	🗆 Yes 🗆	No		
Law/Ordinance Violated	Location		Conviction Date			
Penalty Imposed		Was sentence completed?	🗆 Yes 🗆	No		
Law/Ordinance Violated	Location		Conviction Date			
Penalty Imposed		Was sentence completed?		No		
2. Are charges for any offenses currently pending against you (excluding traffic offenses) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances?						
If yes to question 2, describe nature and status of pending charge:	s using the space below. Atta	ach additional sheets as nee	eded.			
Part E: Attestation						
READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully.						
Signature		Date				