



## OWNERSHIP INFORMATION

### Continued for Prequalification Packet

### LOCATION INFORMATION

1. Trade Name of Location			
2. Location Address			
City	County	State	Zip Code

### OWNER INFORMATION

3. Type of Owner			
<input type="checkbox"/> Individual	<input type="checkbox"/> Corporation	<input type="checkbox"/> City/County/University	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Other _____	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Joint Venture		
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Trust		
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title