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## CUSTOMER INFORMATION

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BUSINESS INFORMATION	
Business Name:	Contact Person:
Address:	Phone (if different): (     )
	Email Address:
Phone: (     )	
Service Needed: <input type="checkbox"/> Maintenance <input type="checkbox"/> Pages Added <input type="checkbox"/> New Website <input type="checkbox"/> PDF File Creation	

EXISTING WEBSITE INFORMATION	
Website Address:	User Name:
Hosting Company:	Password:
Program used to Create Website:	
Website Designer:	Phone: (     )

WEBSITE DESIGN INFORMATION	
Desired Website Address:	Website Pages Desired:
Type of Website:  <input type="checkbox"/> Informational <input type="checkbox"/> Interactive <input type="checkbox"/> Both	<input type="checkbox"/> Company History
	<input type="checkbox"/> Employee Bio
	<input type="checkbox"/> Product/ Services
	<input type="checkbox"/> Links to Other Website(s)
	<input type="checkbox"/> Other