Questionnaire: Name:		
Signature:	Date:	Time:
Possible name of businesses:		
What does this say about your inter	nded business?	
Who are my intended customers (pe	eppers, preppies, families, othe	er):
Please explain:		
Is this a want or their need?		
How much time do I have to dedica	te to this business?	
How much spare money do I have t successful? (Hint: you need at leas		
Who are your resources (vendors ar	nd distributors)?	
How many people do you expect to	hire? (Staff)	
Who are they? (Age range, qualifica	tions and job titles):	
Why are you wanting to start this bu	usiness (What is your reason?	Do you know your reason?):
What do you intend to do with the p	profit?	
How good are you with money?		
What can I do? (Manage, cook, service)	ve, cashier):	

What has to be delegated?
Who, if anyone, can take my place if something happens (sickness or death)?
Where do I intend to build this business?
How do you intend to best serve the customer? (Dine in, carry out, delivery, other):
Do I need collateral or a bank?
Other:
Note: You can take this to the bank
Name:
Name of business:
Intended address:
Research:
Findings:

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