



Richland County Business Service Center

2020 Hampton Street, Suite 1050
P.O. Box 192
Columbia, SC 29202

Phone: (803) 576-2287
Fax: (803) 576-2289
bsc@rcgov.us
<http://www.rcgov.us/bsc>

REQUEST FOR INFORMATION FORM

This form is required of any individual, business, agency, or organization requesting public information about a business which may be included in the Business Service Center database.

Applicant Information

Name of Person applying for the information: _____

Title: _____

Name of business, agency, or organization person is associated with: _____

Mailing Address _____

Phone Number: _____ E-mail address: _____

Cause for request for information: Law enforcement investigation Judicial proceedings

Wish to report the business to the Better Business Bureau Business/person requesting a loan

Other: _____

Business Information (information about the business in question – answer as many as are known)

A specific business New businesses

1) Name of Business: _____

2) Doing Business As: _____

3) Physical Location (street, city, zip): _____

4) Owner(s) of Business: _____

5) Business License # _____

Business Information Requested (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Business Name | <input type="checkbox"/> Doing Business As | <input type="checkbox"/> Mailing Address |
| <input type="checkbox"/> Physical location | <input type="checkbox"/> City/County of business | <input type="checkbox"/> Date business started |
| <input type="checkbox"/> Owner(s) name | <input type="checkbox"/> Work phone number | <input type="checkbox"/> Years with a County license |
| <input type="checkbox"/> NAICS code/ business activity | | |
| <input type="checkbox"/> Other: _____ | | |

Signature of applicant

Date

Please allow 15 business days to respond to your request. Responses may be faster, but will be no longer.

All information requested is subject to the exclusions of the Freedom of Information Act.

Information will be provided in paper format only.

BSC Staff Signature: _____	Response Date: _____
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