

2005 Mecklenburg County Manufacturers Company Data Request Form

This form contains any information we currently have on file for your company. Please update/complete the data for your company and return as soon as possible by faxing to 704/330-6013. You can also complete the form by downloading a copy from the following link at www.cpcc.edu/planning/forms.htm and returning it via e-mail to Cheryl.roberts@cpcc.edu. If there are no changes, please sign and date the bottom of the form and return as soon as possible.

Company:

Do you manufacture at this location? Yes No Do you have other locations in the area? Yes No

Address: Division:

City: State: Zip: County:

Phone: Fax: Year company was established locally:

E-mail: Web:

● Please fill in the name, title and email address for the President, Owner, Plant Mgr, or CEO of the local facility:

Name: Title: Email:

● Please check the number of employees in your company at your location:

<input type="checkbox"/> 1-24	<input type="checkbox"/> 50-99	<input type="checkbox"/> 250-499	<input type="checkbox"/> 750-999	<input type="checkbox"/> 1500-2499	<input type="checkbox"/> 4500-5499	<input type="checkbox"/> 7500+
<input type="checkbox"/> 25-49	<input type="checkbox"/> 100-249	<input type="checkbox"/> 500-749	<input type="checkbox"/> 1000-1499	<input type="checkbox"/> 2500-4499	<input type="checkbox"/> 5500-7499	

● Please verify/complete the names, titles, and email addresses of the persons in charge of the following areas:

	Name	Title	E-mail Address
2nd in Command:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Accounting:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Personnel:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Marketing:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Production:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Public Relations:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Purchasing:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Internat'l Marketing:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Chief Info Officer:	<input type="text"/>	<input type="text"/>	<input type="text"/>

- | | |
|--|--|
| <input type="checkbox"/> Do you import? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Corporate headquarters located at this site? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Do you export? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Does this company have a parent company? <input type="checkbox"/> Yes <input type="checkbox"/> No |

Company name:

Company country:

● Please list your company's major local product(s):

1.
2.
3.

● Form completed by:

<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Please print your name	E-mail Address	Phone	Today's date

Thank you for your cooperation. For any questions concerning this form, please call Cheryl Roberts, Senior Research Analyst, at 704/330-6688. Completed form may be faxed to 704/330-6013 or mailed to Cheryl Roberts, CPCC Center for Applied Research, PO Box 35009, Charlotte, NC 28235.

Please fax completed forms to 704/330-6013