

PREFERRED PENSION PLANNING CORPORATION
991 ROUTE 22 WEST
BRIDGEWATER, NEW JERSEY 08807
908-575-7575
908-575-8889 FAX

12. Plan Trustee(s) _____

13. Date of incorporation (*if a corporation*) or date business began (*if not a corporation*): _____
14. Prior businesses:
- ▶ Was there a predecessor organization to the existing company?
 Yes No (*if no, please skip to item 15*)
 - ▶ Name of prior organization: _____
 - ▶ Type of business entity (Sole Prop., Partnership, Corp., etc.): _____
 - ▶ Dates prior organization was in existence: from _____ to _____
 - ▶ Did prior organization ever sponsor a retirement plan? Yes No
15. Other businesses:
- ▶ Do the principals own, control, or manage any other business? Yes No
 - ▶ Is this business affiliated in any way with any other business? Yes No
 - ▶ Is this business an owner or division of any other business? Yes No
 - ▶ Please describe (on a separate sheet) the relationship with any affiliated business.
16. Other plans:
- ▶ Does the company currently sponsor any retirement plans? Yes No
If YES, who is the current administrator? _____
 - ▶ Did the company ever sponsor a retirement plan which was terminated? Yes No
17. Does the company employ any of the following types of employees? (*check all that apply*):
 Union employees Nonresident aliens Leased employees
18. How much of an annual contribution could the employer make to the plan:
 None; plan is for employee contributions only.
 \$ _____
 _____ % of total annual payroll of employees eligible to participate in the plan
19. Who is your company's payroll provider? _____
20. Company's Accountant:
- Name: _____
- Firm: _____
- Address: _____
- Telephone: () _____ Fax: () _____

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21. Company's Attorney:

Name: _____

Firm: _____

Address: _____

Telephone: () _____ Fax: () _____

22. Company's Financial Advisor:

Name: _____

Firm: _____

Address: _____

Telephone: () _____ Fax: () _____

Completed by: _____

Date: _____