

BUSINESS STARTUP CHECKLIST



Business Name and Idea:

Answer: _____
_____ Date: _____

Business (Coach or Mentor):

Answer: _____
_____ Date Completed: _____

Business Plan:

Answer: _____
_____ Date Completed: _____

Business Model:

Answer: _____
_____ Date Completed: _____

Business Email (not a Gmail-yahoo):

Answer: _____
_____ Date Completed: _____

Business Phone number (not your personal):

Answer: _____
_____ Date Completed: _____

Business License LLC-Corporation:

Answer: _____
_____ Date Completed: _____

Business EIN:

Answer: _____
_____ Date Completed: _____

Business Address:

Answer: _____
_____ Date Completed: _____

Business Bank Account:

Answer: _____
_____ Date Completed: _____

Business Duns Number:

Answer: _____
_____ Date Completed: _____

Merchant Account; (PayPal-square):

Answer: _____
_____ Date Completed: _____

Business accounting software (QuickBooks etc.):

Answer: _____
_____ Date Completed: _____

Business logo:

Answer: _____
_____ Date Completed: _____

Business website:

Answer: _____
_____ Date Completed: _____

Business Social Media Pages (not personal pages) Like Pages:

Answer: _____

_____ Date Completed: _____

Business YouTube:

Answer: _____
_____ Date Completed: _____