

Property Name:		
Primary Address <i>(must be a physical NC address):</i>		
City:	State: North Carolina	Zip <i>(Five Digit):</i>
Primary Business Telephone:	Secondary Telephone:	Fax:
Circle: Business Toll Free Home Cell	Circle: Business Toll Free Home Cell	
Property Description: <i>(max 1,000 characters including spaces, or approximately 125 words.)</i>		
Email:		
Web Address:		
Type of Shopping: <i>Choose as many as apply</i>		
<input type="checkbox"/> Antique Shops <input type="checkbox"/> Art / Arts & Crafts <input type="checkbox"/> Clothing Boutiques <input type="checkbox"/> Farmers' Markets	<input type="checkbox"/> Flea Markets <input type="checkbox"/> Food & Wine <input type="checkbox"/> Furniture Shopping <input type="checkbox"/> Gifts & Collectibles	<input type="checkbox"/> Malls / Shopping Centers <input type="checkbox"/> Outlet Malls & Stores <input type="checkbox"/> Retail & Chain Stores <input type="checkbox"/> Specialty Shopping
Amenities: <i>Choose as many as apply</i>		
<input type="checkbox"/> Free Parking <input type="checkbox"/> Motorcoach Parking	<input type="checkbox"/> Public Restroom <input type="checkbox"/> Restaurant on Site	
Hours of Operation:	Season of Operation:	
Driving Directions:		
<i>Thank you for taking the time to fill out this form. Please fax it back to your county contact:</i>		