

Interest Form



Date _____

Name of Company _____

Address _____

City _____ State _____

Zip _____

Contact name _____

Phone _____

Email _____

Size of facility (acres) _____

Number of employees at the Elizabeth River facility _____

Office/Retail Manufacturing Shipyard Port terminal Transportation Church

Other (describe) _____

Briefly describe your operations at the local facility _____

Return to: Pam Boatwright, River Stars Businesses Program Manager, Elizabeth River Project:
475 Water Street, Suite C103A, Portsmouth VA, 23704
pboatwright@elizabethriver.org, 757-399-7487. Fax 757-397-8377

Also available online at RiverStarBusinesses.org

