



Application for Business Unit

Information submitted will be held in confidence.

Business Name:

Owner(s) Name

Full Address:

Telephone:

Mobile:

Fax:

E-mail:

Web Address:

Form of Ownership:

Corporation

Partnership

Sole Proprietor

Nature of business: Include a brief description of product/service and nature of market. Submit product brochures and company literature, if available can be a digital version).

Date Business established:

Company form (C-Corp, S-Corp, LLC, etc.):

Current stage of development of product and/or service (e.g., working on prototype, product in advanced development, etc.):

Current sales revenue (dollar volume per month):

Number of employees Full-time:

Part-time:

Type of financing used to operate Business to-date:

Venture capital firms

Private Investors

Personal resources

Other (indicate nature):

BUSINESS PLAN

Status of business plan:

Completed (please attach a copy)

In preparation & available by: _____

Not yet started

Would you like help in writing a business plan?

Yes

No

SPACE NEEDS

Type of space:

Other:

Any special facility requirements such as electrical, WiFi

No

Yes (Please Specify)

Other relevant information:

Applicant's name:

Title:

Signature:

Date:

Please attach or mail a business plan and summary, company and project literature.
[Include contact information]