



Hammond Development Corporation

Entrepreneurs. Creatives. Thinkers.

Client Application

Business name: _____

Current business address: _____

Is your business: New Existing If existing, year established: _____

Type of ownership:

Proprietorship Partnership Regular Corporation Subchapter S Corp. LLC LLP

Principal who will serve as the main contact with incubator staff: _____

Other owners/Partners/Stockholders/Members (*name, title, address, phone number of each*):

Do you have a Business Plan?: Yes No

Brief description of business, its products and market:

Initial capitalization of your business, sources, and amounts:

Do you currently need financing for your business?: Yes No If yes, how much?: _____

For what purpose?: _____

What type of space are you applying for?:

Office Light Manufacturing Both Associate/Part Time

How many square feet of each do you need?: Office _____ Light Manufacturing _____

On what date do you need the space?: _____

What special equipment or facility requirements do you have? (*electrical, ventilation, plumbing, ceiling height, etc.*)

What is the long-term vision for your company?

What other markets, including export, do you anticipate expanding your business into?

What entrepreneurial workshops, seminars, or training do you currently have?

What entrepreneurial training do you feel you will need?

Additional Documents Required

1. Business Plan
2. Latest two years' tax returns for the Business, if not available, then latest two years' personal tax returns
3. Most recent profit and loss statement and balance sheet for the business.
4. Copy of Hammond Business license (*This can be brought in once business address is established*)

Please submit these documents along with your application.

Signature of applicant: _____

Date: _____

Owner/President:

Phone:

Email: