

NAME (PRESIDENT OR CEO) \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

EMPLOYER ID. # AND/OR PERSONAL SS # \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

HOW IS YOUR BUSINESS ORGANIZED? (CIRCLE ONE)

- A. SOLE PROPRIETORSHIP
- B. PARTNERSHIP
- C. LLC
- D. CORPORATION                      TYPE? \_\_\_\_\_

IF THIS IS AN EXISTING BUSINESS:

- A. DATE BUSINESS STARTED \_\_\_\_\_
- B. WHERE STARTED \_\_\_\_\_
- C. WHAT STAGE OF DEVELOPMENT (CIRCLE ONE)
  - 1. IDEA STAGE
  - 2. EARLY STAGE.
  - 3. PROTOTYPE STAGE (MANUFACTURED & SOLD IN SMALL QUANTITIES)
  - 4. DEVELOPMENTAL STAGE (PRODUCT MATURITY, SALES VOLUME & MGMT CAPABILITY)
  - 5. EXPANSION STAGE (CAPABLE OF STANDING ON YOUR OWN)
- D. NUMBER OF EMPLOYEES    FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_

LIST THE NAME(S) AND TELEPHONE NUMBER(S) OF THE PRINCIPAL(S)

NAME	TITLE	PHONE	% OWNED	P/T or F/T
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TYPE OF BUSINESS (CIRCLE ONE)

- A. HIGH TECHNOLOGY
- B. SERVICE
- C. RETAIL

- D. SOFTWARE
- E. LIGHT MANUFACTURING
- F. OTHER \_\_\_\_\_

BRIEFLY DESCRIBE YOUR BUSINESS.

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BRIEFLY DESCRIBE YOUR PRODUCT OR YOUR SERVICE.

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DESCRIBE YOUR BUSINESS BACKGROUND OR EXPERIENCE WITH PRODUCT/  
SERVICE.

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HOW IS YOUR PRODUCT UNIQUE?

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DESCRIBE YOUR TARGET MARKET AND MARKET SIZE.

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HOW CAN YOUR PRODUCT OR TECHNOLOGY BE PROTECTED?

- A. PATENT
- B. TRADEMARK or COPYRIGHT
- C. TRADE SECRET
- D. OTHER \_\_\_\_\_

WHAT IS THE PRIMARY SOURCE OF FINANCING FOR YOUR BUSINESS?

- A. PERSONAL SAVINGS
- B. OPERATING INCOME
- C. EQUITY INVESTMENT  
INFORMAL/PRIVATE \_\_\_\_\_ VENTURE CAPITAL \_\_\_\_\_
- D. DEBT  
PERSONAL \_\_\_\_\_ BANK \_\_\_\_\_

HOW WILL YOU REPAY INVESTORS?

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**CURRENT CAPITALIZATION OF YOUR BUSINESS (CIRCLE ONE)**

- A. \$0-\$50,000
- B. \$50,000-\$250,000
- C. \$250,000-\$500,000
- D. OVER \$500,000

**ADDITIONAL NEAR-TERM CONTEMPLATED CAPITALIZATION**

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TOTAL ASSETS \_\_\_\_\_

TOTAL REVENUE (PAST 12 MONTHS) \_\_\_\_\_

ANNUAL GROWTH RATE (%) \_\_\_\_\_

ESTIMATED EMPLOYMENT:                      DIRECT                      INDIRECT

CURRENT	FULL TIME _____	PART TIME _____	_____
ONE YEAR LATER	FULL TIME _____	PART TIME _____	_____
WITHIN 5 YEARS	FULL TIME _____	PART TIME _____	_____

**WHAT DO YOU CONSIDER ARE YOUR BIGGEST OPORTUNITIES AND NEEDS?**

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DO YOU HAVE A BOARD OF ADVISORS?    YES \_\_\_\_\_ NO \_\_\_\_\_

ARE YOU WILLING TO ACCEPT COUNSELING FROM A BOARD OF ADVISORS APPOINTED FOR YOU? YES \_\_\_\_\_ NO \_\_\_\_\_

**INCUBATOR SERVICE REQUESTED (CIRCLE ONE)**

- A. RESIDENT (PLAN TO MOVE INTO THE INCUBATOR)
- B. AFFILIATE (NON-RESIDENT USE OF THE SERVICES ONLY)

**DESCRIBE WHAT YOU EXPECT THE INCUBATOR TO PROVIDE.**

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**FOR INCUBATOR RESIDENTS, WHAT IS THE AMOUNT OF SPACE NEEDED?**

OFFICE	_____	SQ. FT.
LAB	_____	SQ. FT.
LIGHT MANUFACTURING	_____	SQ. FT.
OTHER _____	_____	SQ. FT.

HOW LONG DO YOU EXPECT TO BE IN VITEC2?

\_\_\_\_\_ 1 YR                  \_\_\_\_\_ 2 YR                  \_\_\_\_\_ 3 YR

HOW DID YOU HEAR ABOUT US?

\_\_\_\_\_

\_\_\_\_\_

**CHECKLIST**

THE FOLLOWING DOCUMENTS ARE ATTACHED:

- \_\_\_\_\_ BUSINESS PLAN, INCLUDING MARKET STATISTICS,  
CONTRACTS.
- \_\_\_\_\_ LIST OF OFFICERS, INCLUDING BRIEF BIOS
- \_\_\_\_\_ SALES HISTORY OF YOUR PRODUCTS
- \_\_\_\_\_ PATENTS
- \_\_\_\_\_ PRODUCT LITERATURE, BROCHURES, PHOTOS
- \_\_\_\_\_ CUSTOMER TESTIMONIALS, LETTERS OF SUPPORT
- \_\_\_\_\_ CASHFLOW PROJECTIONS
- \_\_\_\_\_ LIST OF CURRENT OR REQUIRED CAPITAL EQUIPMENT

I HAVE READ THE TENANT LEASE AGREEMENT AND CLIENT MANUAL AND  
AGREE TO THE TERMS THEREIN.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

I certify that the above information is true and accurate and that Vitec<sup>2</sup> will retain this application whether approved or denied. I hereby authorize Vitec<sup>2</sup> to verify my credit history and employment and to release to any credit information agency any information regarding the credit experience with the signer, if applicable.

Confidentiality of the information gathered by Vitec<sup>2</sup> will be maintained as required under the Privacy Act.