MEMBER APPLICATION FORM

Business Name:				
Principals & Titles:				
Full Address:				
Telephone:	Mobile:	Fax:		
E-mail:	Web Address:			
Form of Ownership:	\Box Corporation	☐ Partnership	☐ Sole Proprietor	
Nature of business: Inclubrochures and company I	ude a brief description of prod iterature, if available.	uct/service and nature of	market. Submit product	
Brief background of pri	ncipal officer(s): (please attac	h resume)		
Date Business establishe	ed: Con	npany form (C-Corp, S-Co	orp, LLC, etc.):	
Current stage of development, etc.):	pment of product and/or sei	rvice (e.g., working on prot	otype, product in advanced	
Number of employees (include principals) Full-time:			Part-time:	
Projected number of em	nployees within 12 months:			
Type of financing used t	to operate Business to-date:			
☐ Venture capital firms	☐ Private Investors	☐ Personal resources	\square Other (indicate nature):	

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BUSINESS PLAN					
Status of business	olan:	☐ Completed (ple	☐ Completed (please attach a copy)		
☐ In preparation &	available by:	\square Not yet started	□ Not yet started		
Would you like hel	p in writing a business plan?	☐ Yes	□ No		
SPACE NEEDS					
Type of space (i.e. number of offices/open space areas, wet-dry lab spaces, manufacturing):					
Other:					
Any special facility requirements such as electrical, ventilation, or floor load, etc.?					
□ No	☐ Yes (Please Specify)				
Other relevant information:					
Applicant's name:		Title:			
Signature:		Date:			
By signing this appli	cation form, I acknowledge tha	t all information submitt	ted to the City of Auburn is subject to		

By signing this application form, I acknowledge that all information submitted to the City of Auburn is subject to Washington's Public Records Act (RCW 42.56).

Please attach or mail a business plan and summary, company and project literature, and management team biographies to: [include contact information]

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