



Application for Tenancy

Company Name:

Primary Contact:

Title:

Brief Business Description of Company:

Address:

City, State, Zip:

Phone: E-Mail:

I Am Applying As:

An Existing Business Approximate Date Started:

A New Business Projected Start Date:

Corporate Form: C S LLC Partnership Sole Proprietorship

State in which incorporated: Employer Identification Number (EIN):

Corporate Officers

President	<input type="text"/>	ownership	<input type="text"/>	(%)
Vice President	<input type="text"/>	ownership	<input type="text"/>	(%)
Secretary/Treasurer	<input type="text"/>	ownership	<input type="text"/>	(%)

List each product that your company has developed and/or those that you intend to develop:

*\$100 Application Fee. Make check payable to:
 Lansing Economic Development Corporation (LEDC)
 1000 S. Washington Ave. #201
 Lansing, MI 48910

BUSINESS PLAN

Do you have a business plan?
(If Yes, Please attach a copy)

Yes No

Please answer the following questions if you do not have a business plan and/or the business plan does not answer the following questions:

If you are already in business, has your product
proven viable? Yes No
(If No, Please describe your obstacles below)

Where do you currently market your products or services:

Please list local, regional, or national/international firms you consider to be your primary competition:

Are you planning to add new product(s) within the next two years? (Please explain) Yes No

Are you planning to expand your markets within the next two years? (Please explain) Yes No

How many new full and part-time employees do you plan to
add over the next two years?

Full-Time:

Part- Time:

What will their roles be:

TENANCY

What is your target date for tenancy?

What are your approximate space requirements?

Office: Square Feet Storage: Square Feet
Production: Square Feet Other: Square Feet

What are your total space requirements in:

One Year: Square Feet
Two Years: Square Feet
Three Years: Square Feet

Do you have any non-standard telephone system requirements? (Please explain) Yes No

Do you require electrical service beyond the standard service? (Please explain) Yes No

Will you need soundproofing and/or special partitioning? (Please explain) Yes No

Do you have any special temperature necessities? (Please explain) Yes No

Other specific needs or requirements? (Please explain) Yes No

FINANCING

Please describe your personal financial investment and time commitment to this business:

What are your projections of needed capital for the business during the next 1-3 years?

Which funding sources do you intend to pursue?

List the top three milestones which the company must achieve in the first year of operation:

- 1.
- 2.
- 3.

How can the Runway best help you meet these milestones?

Please add any additional information that will help the selection committee evaluate your company's potential for success:

Please list three references with contact information regarding your business plan and the people involved:

1.
2.
3.

Required Attachments (check boxes where complete)

- Resumes of key principals in the business
- Copy of Business Plan (If Available)

Credit Review and Waiver of Confidential Records

Applicant acknowledges that the staff may obtain relevant credit information with respect to the applicant business and/or its principals.

- Authorization for Credit Review
- Authorization for Waiver of Confidential Records

Certification

My signature below certifies that all the information contained in this application is true and complete. I authorize the Runway Fashion Incubator staff to verify the information contained on this application by contacting the references given. I also understand that the information contained in this application will be used only to determine my eligibility to lease space in The Runway and will be kept confidential.

Applicant (Typed, if Completing Electronically)

Date

Title

Please Send To:

Joe Carr
Startup Innovation Manager
Lansing Economic Area Partnership (LEAP)
1000 S. Washington Ave., Ste. 201
Lansing, MI 48910
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517-230-2942