



APPLICATION





A QUICK NOTE

Welcome to EntreLAUNCH...the Boone County Chamber of Commerce small business resource program! We assist entrepreneurs from idea, to start-up, to expansion. This application is designed to account for all stages of business, so not all information requested will be relevant to your situation. Just fill in the categories most pertinent to your stage of business development and let's get this thing off the ground!

- *EntreLAUNCH Advisory Committee*

CONTACT INFORMATION

Name of Applicant	
Address	
Phone	
Email	
How did you hear of EntreLAUNCH?	

COMPANY INFORMATION

Company Name (legal)	
Doing Business As (dba)	
Brand / Trade Name	
Subsidiary companies	
Legal Form of Business	
State Incorporated	
County licensed	

LIST ANY OWNERS OR PARTNERS

Owner/partner	Home Address	Phone	% owned

IF EXPANDING, LIST ANY KEY MANAGEMENT OR LEADERSHIP

Chairman/woman of the Board	
President	
CEO	
Other key managers	
Governing/Advisory Bodies	
Other	

IF EXPANDING, TELL US A LITTLE BIT MORE ABOUT YOUR COMPANY

Year the company was founded	
Incorporation date	
Year product/service was introduced	
Stage of formation/plans	
Progress of current plan	
Milestones/successes	
Other developmental indicators	

WILL YOU NEED ANY ADDITIONAL FUNDING OR CAPITAL?

Last year's total sales	
Last Year's total profit	
Amount of funds sought	
Basic use of funds sought	

DESCRIBE YOUR PRODUCT OR SERVICE:

Description of product or service	
Number and type of prod./services	
Number of products in each line	

DO YOU OWN ANY PATENTS AND LICENSES?

Patents held or pending	
Trademarks held or pending	
Licenses held or pending	

WILL YOU NEED ANY OFFICE, WAREHOUSE OR PRODUCTION SPACE?

State your intended use of space	
How much space is needed?	
<ul style="list-style-type: none">• Office space	
<ul style="list-style-type: none">• Manufacturing space	
<ul style="list-style-type: none">• Warehouse space	
<ul style="list-style-type: none">• Target move-in date	

WILL YOU NEED ANY EQUIPMENT?

Type of Office equipment needed	
<ul style="list-style-type: none">• Fax	
<ul style="list-style-type: none">• Computer terminal	
<ul style="list-style-type: none">• Internet connection/wifi	
<ul style="list-style-type: none">• Administrative support	
<ul style="list-style-type: none">• Meeting room	
<ul style="list-style-type: none">• AV equipment	
<ul style="list-style-type: none">• Other	

HOW ABOUT JOB CREATION? DO YOU SEE A NEED FOR SKILLED WORKFORCE SOON?

# of employees at start-up	
# of employees currently	
Employee growth projection:	
<ul style="list-style-type: none">• One year	
<ul style="list-style-type: none">• Three years	
<ul style="list-style-type: none">• Five years	
<ul style="list-style-type: none">• Skills needed	

PLEASE PROVIDE A SHORT SYNOPSIS OF WHY YOU ARE STARTING OR EXPANDING THIS BUSINESS AND WHY YOU THINK YOU WILL BE SUCCESSFUL:

HOW WILL YOUR BUSINESS BE FINANCED THE FIRST 6 MOS., 12 MOS., 3 YEARS OF OPERATION?

Personal funds	
Family funds	
Acquaintances/business partners	
Other	
Bank Loans	
TOTAL OF START-UP CAPITAL	

BUSINESS PLAN ENCLOSED?

*I acknowledge the information provided in this application is accurate. I also understand my information will only be shared with the members of the EntreLAUNCH Advisory Committee.

Signature _____

Date _____

APPLICATIONS SHOULD BE SUBMITTED TO:

EntreLAUNCH
Boone County Chamber of Commerce
903 Story Street
Boone, IA 50036