



WHITLEY
COUNTY economic
development corp



INDIANA
Small Business Development Center

APPLICATION FOR CLIENT STATUS

SECTION 1 – CONTACT INFORMATION

Company Name:		FEIN:	
Contact Name:		Contact Title:	
Company Street Address:			
City, State, Zip:			
Email Address:		Website:	
Company Phone:	Mobile Phone:	Fax:	

SECTION II – COMPANY INFORMATION

Industry:	NAICS/SIC:
Is your business: New () Existing () Year Founded:	
Describe your company's stage of development: Idea () Prototype () Development () Production () Expansion ()	
Is your company licensed to do business in Indiana? Yes () No ()	
Business Structure:	
Ownership Structure:	

Does your company have a current business plan? Yes () No ()
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Briefly describe your business, its products and services

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Estimate the source and amount of investment to date in your business:

Personal:	Grant/Contract:
Investor(s):	Other:
Bank:	

SECTION III – PROJECT DESCRIPTION

What are your objectives for participating in the Accelerating Innovation program?
Please list types of assistance sought (e.g. human resources, management, marketing).

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Describe additional funding requirements of the business and how you plan to obtain these funds (Please attach additional pages if needed).

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List individuals who will be responsible for the company's day-to-day operations.
Please include name, title, and one-sentence job description.

Does your company have a Board of Directors? Yes () No ()

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Have any officers or directors been convicted of a felony? Yes () No ()

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SECTION IV – FINANCIAL INFORMATION

Revenues in 2019:	Operating Expenses in 2019:
Revenues in 2020:	Operating Expenses in 2020:
Revenues in 2021:	Operating Expenses in 2021:

Estimate the number of company employees (including principals).

Current year	Full-time:	Part-time:
+ One-year	Full-time:	Part-time:
+ Two-years	Full-time:	Part-time:
+ Three-years	Full-time:	Part-time:

Are you interested in assistance with new facilities? Yes () No ()

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Are you interested in assistance with project financing? Yes () No ()

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Signature: _____ Date: _____

Printed Name: _____
