

HENDERSON BUSINESS RESOURCE CENTER (HBRC)

Tenant Application

- The Henderson Chamber of Commerce Foundation (HCCF) offers a Business Incubator program for start-up or expanding small businesses in Southern Nevada.
- Potential participants must submit this application and a business plan for review by our HCCF Board to evaluate the company's compliance with the HBRC Business Incubator's requirements.
- All information contained in the application will be kept completely confidential (confidentiality agreements will be signed upon request of the applicant).
- The information requested in this application is confidential and will be used by the Henderson Business Resource Center/Incubator to evaluate your readiness to become a client and help us further understand your business venture.

Please fill out all required paperwork per the checklist below and return it to the HBRC.

Application Checklist:

- | | |
|---|---|
| <input type="checkbox"/> Completed Application | <input type="checkbox"/> Business Plan (Page 4) |
| <input type="checkbox"/> Copy of Business License | <input type="checkbox"/> Copy of Driver's License |
| <input type="checkbox"/> Current Credit Report (if available) | <input type="checkbox"/> \$50 application Fee |
| <input type="checkbox"/> Financial Projections – Income Statement, Balance Sheet & Cash Flow Forecast for Three Years (Verification of Information on Page 3) | |

APPLICANT INFO

Date _____ How You Learned About The HBRC _____

Company Name _____

Contact Name _____ Title _____

Address _____

City/State/Zip Code _____

Work Phone _____ Cell Phone _____ Home Phone _____

Email Address _____

Website _____ Is It Currently "Live" _____

Number of Employees Who Will Work Out Of This Office _____ Full-Time _____ Part-Time _____

Employees Names _____

What are your anticipated operating hours _____



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BUSINESS INFORMATION

Date Business Was Formed _____ Business/Product/Service: _____

Type of Business Proprietorship General Partnership Limited Partnership Corporation

If business is a partnership, fill out requested info below for ALL general partners (including yourself if applicable):

Partner's Name(s) _____ SS # _____ Percent of Ownership % _____

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Partner's Name(s) _____ SS # _____ Percent of Ownership % _____

If the business is a corporation, please fill out requested info below:

Officer Name(s) _____

Officer Name(s) _____

Officer Name(s) _____

E.I.N. Number _____ State of Incorporation _____ Date of Incorporation _____

Type of Corporation C Corp S Corp LLC

Business Stage Concept (Business plan not complete, developing product/service, no sales to date)
 Start-Up (Business plan complete, product fully developed, ready to open business)
 Expanding (Sales achieved, business growing and needs expansion)

Gross Revenue - Last Year \$ _____ Projected This Year \$ _____ Projected Next Year \$ _____

Net Revenue - Last Year \$ _____ Projected This Year \$ _____ Projected Next Year \$ _____

Are there any legal, regulatory, or environmental issues pending against your company? Yes No

Describe _____



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FINANCING/INVESTMENT CAPITAL

Revenue in most recent fiscal year: \$ _____ Year Ending _____

Revenue in previous fiscal years: \$ _____ \$ _____ \$ _____

Financing received to date (Specify debt/equity amounts) Debt \$ _____ Equity \$ _____

By whom? Self Bank Family/Friends Individual Investors Venture Capitalist Other

What are the repayment terms of the financing? (equity conversion, debt repayment, royalty stream %, etc.)

How much capital is needed to fulfill your business plan? \$ _____ by _____ (month/year)

Business Checking Account # _____ Bank Name _____ Balance _____

Business Savings Account # _____ Bank Name _____ Balance _____

Credit Score: _____

OCCUPANCY INFORMATION

Desired date of occupancy _____ Current space needed 200-300 sq ft 300-400 sq ft

Do you anticipate that these needs will change in years two and three? If so, how?

Space Business Is Current Occupying Commercial Facility Home Office Not Applicable Other

Past Landlord Contact Info (if applicable) Contact Name _____

Company Name _____ Phone _____

Address _____ Email _____

Do you have any special utility or security requirements? If yes, please explain



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BUSINESS PLAN

A business plan is required to accompany this application. If assistance or services are needed, please contact the Henderson Chamber of Commerce at 702.565.8951.

Please provide an executive summary of your business plan and include the following information: products/services offered, market niche/served, market strategy, competition, and product differentiation.



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BUSINESS INCUBATOR PARTICIPATION

What types of particular (or specific) assistance do you expect from the business incubator program?

What business services does your company need:

- | | |
|--|---|
| <input type="checkbox"/> Business Plan Preparation | <input type="checkbox"/> Organization Legal Structure |
| <input type="checkbox"/> Conducting Market Research | <input type="checkbox"/> Prototype Development |
| <input type="checkbox"/> Conducting Concept Feasibility Study | <input type="checkbox"/> Strategic Partnering |
| <input type="checkbox"/> Financial Analysis/Product Costs | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Website/Social Media |
| <input type="checkbox"/> Management Team Development | <input type="checkbox"/> Employee Hiring |
| <input type="checkbox"/> Intellectual Property - Patent/Copyright /Trademark | |

By signing this tenant application, the applicant agrees that the information provided is true to the best of their knowledge. Failure to provide honest and accurate information on this application can result in the HBRC breaking its lease agreement with the applicant, thus causing an eviction. The applicant also acknowledges that the Henderson Chamber of Commerce Foundation (HCCF) dba Henderson Business Resource Center (HBRC) may obtain relevant credit information/reports and background checks with respect to the applicant business and/or its principals. Applicant also acknowledges that the HCCF/HBRC will retain this application whether or not it is approved. Application fees are non-refundable and may be required again if applicant does not get approved at this time and submits again at a future date. Signature also shows that the applicant understands that a requirement of being a tenant of the HBRC is that you must be a member of the Henderson Chamber of Commerce (HCC) in good standing. If you are not currently a member of the HCC, you will be required to join prior to moving in and must maintain your membership throughout your occupancy of space in the HBRC.

To Be Signed By All Major Shareholders

Name _____	Signature _____
Title _____	Date _____
Name _____	Signature _____
Title _____	Date _____
Name _____	Signature _____
Title _____	Date _____



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