

MONTGOMERY COUNTY BUSINESS CENTER INNOVATION NETWORK

INTAKE FORM

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- 1. Legal Name of Business:
- 2. Current Address:
- 3. Website:
- 4. Name of President / CEO:
- 5. Email address of President /CEO:
- 6. Telephone Number of President /CEO:

BACKGROUND ON COMPANY

- 1. Legal Structure of Business: C-Corp S-Corp LLC Other
- 2. Industry Type:
- 3. State or Country of Incorporation:
- 4. Last year's Revenue, Grants, or funds raised to date (Please detail):
 - a. Revenues:
 - b. Grants:
 - c. Other funds raised to date:
- 5. Description of Business:
- 6. Current number of Employees:
- 7. Projected number of employees within the next 6 months: 12 months: 24 months:
- 8. Projected Sales/Investment/Grants (please detail):

a. Sales in the next 6 months: 12 months: 24 months:
b. Investment in the next 6 months: 12 months: 24 months:
c. Other Grants in the next 6 months: 12 months: 24 months:

- 9. Please explain what you hope to gain from being part of the Montgomery County Business Center Innovation Network
- 10. How did you hear about the Montgomery County Business Center Innovation Network?
- 11. Desired move in date:
- 12. Desired space (sf) for Office:

 Lab:

 Virtual:

OPTIONAL

1.	Is the business a certified Minority Business Enterprise (MBE)?	Yes	No
	Is the business a certified Disadvantaged Business Enterprise (DBE)?	Yes	No
	Is the business a certified Small Business Enterprise (SBE)?	Yes	No
	Is the business a certified Veteran-Owned Small Business Enterprise (VOSBE)?	Yes	No

SUPPORTING DOCUMENTS REQUIRED

- 1. Copy of the article of incorporation or similar documentation of company structure.
- 2. Business plan or business proposal.