

# Business Development Corporation of Electra

REQUEST FOR INFORMATION/ASSISTANCE

DATE: \_\_\_\_\_

## Contact Information

Contact Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Type of assistance requested \_\_\_\_\_

Cost estimates, if available \_\_\_\_\_

## Business Information

- Check one:  
 New/Start-Up  Relocation of Existing Single Location  Expansion/Additional Location  Other (attach explanation)
- If relocation or expansion, how many years has business been in operation? \_\_\_\_\_  
Number of locations & cities where currently operating: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Number of current employees: \_\_\_\_\_
- Type of business (check one):  
 Industrial/Manufacturing  Warehouse/Distribution  Commercial/Retail  Service  
 Other (describe) \_\_\_\_\_
- Projected number of employees at new location: \_\_\_\_\_
- Product(s): \_\_\_\_\_
- Do you have a business plan for this business start-up, relocation, or expansion?  Yes  No

## Site/Facility Needs

- Site acreage: \_\_\_\_\_
- Building square footage: \_\_\_\_\_
- Utilities and other amenities needs:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Preference:  Lease  Own  Will consider either
- Timeframe (when site/facility needed): \_\_\_\_\_