



## Client Application

*FOR INTERNAL USE ONLY:*

SUITE #

CHECK DEPOSIT #  Please make check(s) payable to Chattanooga Chamber Foundation.

COMPANY NAME: \_\_\_\_\_

OWNER(S): \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

WEBSITE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

SOCIAL MEDIA:

Facebook Page \_\_\_\_\_

Instagram Handle \_\_\_\_\_

Twitter Handle \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

Are you currently in business?  Yes  No

Date this business began or planned start-up date: \_\_\_\_\_

If already in business, please select your work environment:

Home  Office  Other

How did you learn about us?  Chattanooga Area Chamber of Commerce  Online  Social Media  Networking Event  Professional  Friend

Type of Business:  Manufacturing  Service  Distribution  Other

Form of Business:  Proprietorship  Partnership  Corporation  LLC

Owner(s): \_\_\_\_\_

Number of Personnel: \_\_\_\_\_

Space requirements/square footage needed: Office \_\_\_\_\_ Mfg. \_\_\_\_\_

How do you see the INCubator assisting you?

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Do you have a written business plan?  Yes  No

Do you need assistance in preparing a business plan?  Yes  No

If yes, please reach out to the Tennessee Small Business Development Center at 423-756-8668 to schedule a counseling appointment.

**Business plan MUST be attached to your application.**

In one brief paragraph, please give a description of your company:

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Revenue to date:  0 - \$20,999  \$21,000 - \$50,999  \$51,000 - \$100,999  over \$101,000

What are the objectives of the business for the next two years?

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Anticipated move-in date? \_\_\_\_\_

**Contact information for three credit and/or personal references:**

NAME:

ADDRESS:

PHONE:

TYPE OF REFERENCE:

NAME:

ADDRESS:

PHONE:

TYPE OF REFERENCE:

NAME:

ADDRESS:

PHONE:

TYPE OF REFERENCE:

Date application completed: \_\_\_\_\_

**Manufacturing:**

List any flammable, volatile, toxic chemicals or other hazardous materials you propose to use on site at any time: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List details of your hazardous waste disposal methods (if applicable):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All Hazardous waste must be disposed of in accordance with  
Tennessee and Federal regulations.

**Governmental Agencies may require reporting of statistics for analysis and affirmative action only. Submission of the following information is voluntary, is not a condition of acceptance into our program or a consideration in future placement or participation.**

**Sex:**     \_\_\_ Male     \_\_\_ Female

**Race/Ethnicity:**

\_\_\_ **American Indian or Alaskan Native** - A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment

\_\_\_ **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

\_\_\_ **Black or African American** - A person having origins in any of the original peoples of Africa.

\_\_\_ **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

\_\_\_ **White** - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

\_\_\_ **Hispanic or Latinx (All races)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

\_\_\_ **Hispanic or Latinx (White race only)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of the White race.

\_\_\_ **Hispanic or Latino (all other races)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of any race other than White.

\_\_\_ **Two or more races (Not Hispanic or Latinx)** – A person who identifies with more than one of the above classifications.

\_\_\_ **Race missing or unknown** - Applies to **Applicants only**, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

**Veteran:**     \_\_\_ Veteran