



CLIENT INFORMATION PACKET

ARIZONA REGIONAL ECONOMIC DEVELOPMENT FOUNDATION

750 East Bartow Drive, Suite 16 | Sierra Vista, AZ 85635

T: (520) 458-6948 | F: (520) 458-7453

admin@aredf.org

www.aredf.org

I. OVERVIEW

The Business Complex and Innovation Center are an essential part of the Arizona Regional Economic Development Foundation's (AREDF) comprehensive economic development strategy for the community.

The concept of developing local, homegrown businesses compliments the Foundation's efforts to encourage the growth and expansion of successful businesses that contribute to the general economic health of the community, provide new job opportunities, and add to the variety of products and services available to citizens.

Businesses are accepted from those in the idea stage to those working to reach viability. When a client becomes capable of competing in the open market, efforts are made to find their business a permanent location in the community.

II. ELIGIBILITY GUIDELINES

Applicant selection is based on compatibility with other businesses in the buildings and compatibility with the mission of the business development locations. Applicants suited to occupy space in one of the two locations either has a venture in the idea stage or a business in the development stage.

APPLICANTS MUST MEET THE FOLLOWING CRITERIA:

1. Be a new-to-market business or an existing, developing business.
2. Must have the potential of growth and creation of new job opportunities.

APPLICANTS ARE CONSIDERED ON A CASE-BY-CASE BASIS USING THE FOLLOWING CRITERIA:

1. Credit worthiness.
2. Growth and job creation potential.
3. Applicant's commitment to the venture - both financial and personal time.

ELIGIBILITY RESTRICTIONS

Businesses with limited growth potential, those operated as a hobby and retail ventures are not eligible for occupancy.

III. LEASING POLICIES

Occupancy Terms. All leases will have a minimum commit length of six (6) months with the option of extending the lease an additional six (6) months at a time. Renewals are subject to the venture's progress and compatibility with other businesses in the business development locations. Generally, the goal within the locations is for each business to become capable of competing in the open market and to find a permanent business location elsewhere in the community within two (2) years of signing the first lease. This time period may be shortened or lengthened, as directed by AREDF.

Success Stories. AREDF truly values the relationships it develops with you and takes great pride in the stories about your individual experiences and successes throughout your residency in the business development locations.

By becoming a client, you agree to allow AREDF to publish your story and your name in various marketing mediums for the purpose of reporting AREDF activity to business partners, stakeholders, and the community.

IV. APPLICATION PROCEDURES

The focus of the business development locations is to foster business growth in a low-cost, professional environment. It is therefore necessary that we fully understand the business approach and practices of potential clients so we can properly assist them in their venture to become strong, independent companies with the ability to grow and move out into their own permanent location.

FORMAL APPLICATION PROCESS:

1. **Submission of Application.** Potential clients will submit the Application and all supporting documentation to AREDF for review. AREDF will review the application to determine if the venture is compatible with the goals and objectives of the business development locations.
2. **Credit Verification.** At the time of review, a credit check may be performed for all principals associated with the venture. Accordingly, applicants must complete the Credit Verification form provided in the packet.
3. **Business Plan.** A business plan is required before the application can be approved. If an applicant lacks a business plan, they will be referred to the Small Business Development Center (SBDC) for help with drafting a formal plan.
4. **Approval.** Once all applicable information has been reviewed and AREDF has verified compatibility, the applicant will be notified of approval.
5. **Lease Agreement.** Once approval of the Application has been given and credit worthiness has been verified, AREDF will setup a meeting to discuss the move-in date and the terms of the Lease Agreement.



OFFICE SPACE APPLICATION

APPLICANT INFORMATION

Applicant Name: _____ Date: _____

Street Address: _____ Unit #: _____

City: _____ State: _____ ZIP: _____

Phone: _____ E-mail Address: _____

Name of Business: _____

Principal Officer(s) & Titles: _____

(Please attach a resume for each officer)

Business Address: _____ Unit #: _____

City: _____ State: _____ ZIP: _____

Phone: _____ E-mail Address: _____

Website: _____

Date Business Established: _____ Form of Business (PC, LLC, etc.): _____

City Business License Number: _____

How did you hear about the AREDF's business development locations? _____

BUSINESS INFORMATION

Current Gross Sales: \$ _____ Number of Employees (Including Principals): _____

Please Estimate Future Employment Numbers:

One Year From Now: Full-time: _____ Part-time: _____

Two Years From Now: Full-time: _____ Part-time: _____

Does Your Company Have a Business Plan? YES NO IN DRAFT PROCESS If "Yes" please attach a copy

Please attach a non-confidential executive summary of your business:

What is the market need you are solving? What is the solution you are offering? Who are your target customers?

Have you secured any of the following to capitalize your business?

Government Grant/Contract: \$ _____ What Agencies? _____

Angel Investment: \$ _____ Venture Capital: \$ _____ Corp. Partner Investment: \$ _____

Client Information Packet

Other Sources: _____ \$ _____

Total Initial Investment in your Business: \$ _____

If you currently have any of the following service providers, please provide the requested information:

Bank Name: _____ Location: _____

Attorney's Name: _____ Firm: _____

Accountant Name: _____ Firm: _____

YOUR BUSINESS NEEDS

What date do you need occupancy? _____ Lease term desired: 6 months One year

How many work stations do you need? _____ What type of space? Cubicle Private Office

Briefly describe why you want to locate your business in an AREDF business development location:

Please check any assistance you may need:

Networking Accounting Legal Venture Capital

Management Mentoring Technical Marketing

Other _____

DISCLAIMER AND SIGNATURE

My signature below certifies that all the information contained in this application is true and complete. I authorize AREDF to verify the information contained in this application by contacting any of the sources provided.

I understand that this application, when submitted, becomes the property of AREDF and will be retained whether or not it is approved.

Name: _____

Name: _____

Title: _____

Title: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

CREDIT REPORT AUTHORIZATION AND RELEASE

Authorization is hereby granted to ARIZONA REGIONAL ECONOMIC DEVELOPMENT FOUNDATION (AREDF) to obtain a standard factual data credit report through a credit reporting agency chosen by AREDF.

My signature below authorizes the release to the credit reporting agency a copy of my credit application, and authorizes the credit reporting agency to obtain information regarding my employment, savings accounts, and outstanding credit accounts (mortgages, auto loans, personal loans, charge cards, credit unions, etc.).

Authorization is further granted to the reporting agency to use a photo static reproduction of this authorization if necessary to obtain any information regarding the above mentioned information.

Applicants hereby request a copy of the credit report obtained with any possible derogatory information be sent to the address of present residence, and holds AREDF and any credit reporting organization harmless in so mailing the copy requested.

Any reproduction of this credit report authorization and release made by reliable means (for example, photocopy or facsimile) is considered an original.

Name: _____

Name: _____

Title: _____

Title: _____

Signature: _____

Signature: _____

Date: _____

Date: _____