

MILWAUKEE COUNTY RESEARCH PARK
TECHNOLOGY INNOVATION CENTER
10437 INNOVATION DRIVE, SUITE 123
WAUWATOSA, WISCONSIN 53226-4815
(414) 778-1400 (414) 778-1178 (FAX) gtm@mcrpc.org

TENANT APPLICATION FORM

SECTION I - COMPANY INFORMATION

Name of Company _____

Contact Person _____

Contact's Position with Company _____

Current Address _____

City and State _____

Phone _____ Fax _____

E-mail _____ URL _____

Business Form (Corporation, Sole Proprietorship, LLC, etc.) _____

Company Ownership and Principals (Attach another sheet if necessary):

Name _____ Percent _____ Full Time Y/N

Name _____ Percent _____ Full Time Y/N

Name _____ Percent _____ Full Time Y/N

Company Officers (Attach another sheet if necessary):

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

How did you hear about the Milwaukee County Research Park's Technology Innovation Center? _____

Describe your business, its products, and/or services _____

Year Company established _____ Current Number of Employees _____

Type of space needed (office, laboratory, assembly, etc.) _____

Amount of space needed in square feet _____

Date space needed _____ For how long _____

Special needs, if any (high voltage, Internet, loading access, handicap access, etc.):

Give the names of at least three references, to include (1) banking relationship, (2) credit reference (credit card, previous landlord, etc.), and (3) credit or character reference. Please provide account numbers for bank and credit references.

(1) Bank _____

Type of Account _____ Contact Name _____

Account Number _____ Phone Number _____

(2) Credit _____

Type of account _____ Contact Name _____

Account Number _____ Phone number _____

(3) Person's Name or Institution _____

Relationship _____ Organization _____

Account Number _____ Phone number _____

SECTION II - REQUIRED DOCUMENTATION

Attach a business plan with application and certificate of insurance prior to occupancy. If tenant is accepted the business plan shall be retained and become part of the tenant's permanent file. Otherwise it shall be returned to applicant.

(1) The Business Plan should include at least the following: (a) **Cover page**, (b) **Table of contents**, (c) **Executive summary**, (d) **Company description**, (e) **Markets and competition**, (f) **Products and services offered**, (g) **Sales, marketing, and promotion plans**, and (h) **Financial projections**, to include amount and sources of capital, most

current income statement and balance sheet, source of income for living expenses, if plan does not show salaries or profit.

(2) Proof of insurance. Terms and coverage per the Lease

(3) Personal Guarantee: Because of the financial instability of most start-up businesses and lack of sufficient corporate assets, one or more of the officers or principals of all business entities that locate in the Technology Innovation Center will be required to sign a personal guarantee of the obligations under the Lease, unless the business is publicly traded.

SECTION III - DISCLOSURE OF SERVICES AND TENANT EXPENSES

The rent and cost structure of the Technology Innovation Center are based primarily on an “a la carte” plan, that is each tenant only pays for the space and services it requires and actually uses. This has allowed the Technology Innovation Center to keep expenses down and the rent and other costs to the tenant extremely reasonable.

(1) Costs normally included in the rent (subject to terms and conditions of each individual lease): **Premises, electricity (normal office usage), heat, sewer and water, air conditioning (normal office usage), building directory signage, and refuse disposal (dumpster for tenant to dispose of its own refuse).**

(2) Costs not included in the rent: **Parking, premises janitorial, telephone, Internet, tenant liability and business insurance, cable connection to telephone demark, cable connection to Internet backbone, conference room usage, furniture, fax machine, copier, room keying, and room signage.**

(3) Rent, with the exception of the first month’s rent, shall be paid by electronic transfer to the bank account of Landlord or to the bank account of Landlord’s authorized agent, as may be designated by Landlord from time to time.

(4) Estimated cost of services not included in the rent (subject to change w/o notice):

Parking	\$10.00 per space per month
Janitorial.....	Varies
Telephone.....	Per terms of service provider
Internet	\$60.00 – \$120.00 per month (TIC backbone)
Insurance	Market Rates
Cabling (Telephone).....	\$100.00 - \$150.00 (excluding premises)
Cabling (Internet).....	\$100.00 - \$150.00 (may be lower if done with telephone)
Conference Room.....	\$5.00 - \$10.00 per hour (includes AV equipment)
Fax.....	\$0.25 per page
Copier.....	\$0.15 per page
Room Keying	\$15.00 per door
Room Signage	\$12.00 per insert

Signature (Required) _____ Date _____