



## ROUND 2 APPLICATION

Each member of the team for applicant business must complete and sign the following:

Check here if this is the lead contact for the application

Name

Address

Phone Number(s)

Email Address

Applicant Business Name:

### APPLICANT TEAM MEMBER ACKNOWLEDGEMENT OF PROGRAM RULES

By signing below, I acknowledge that I have read, understood, and agree to be bound by all the [rules](#) of the *Kick Start Middlebury* program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

### APPLICATION INFORMATION

Lead Contact, please provide the following:

Is this an expansion of an existing business:      Y      N

If "yes," provide:

Address

Website

Primary Type of Business of Applicant:

Primary Products/Services Offered by Applicant:

Location (s) under consideration:



Status of location inquiries, financing, permitting, and any other impediments to start-up.

**ATTACHMENTS:**

Business Proposal

Financial Projections

Financial Statements (If applicant is an existing business – P&L and balance Sheet for 2-3 years)