

**TECHNOLOGY INNOVATION CENTER at Research Park**  
**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 \_\_\_\_\_