



## BRUNSWICK LANDING: MAINE'S CENTER FOR INNOVATION TOPSHAM COMMERCE PARK BUSINESS INFORMATION

In order for the Midcoast Regional Redevelopment Authority (MRRA) to better assist your company in selecting a site at Brunswick Landing, it is important for us to gather your company's project information. Therefore, we ask that you complete the following questionnaire with as much detail as possible. All the information you provide will be treated confidentially.

Completed forms should be sent to: MRRA, 4 Admiral Fitch Avenue, Brunswick, ME 04011. Should you have any questions about this questionnaire, please contact our office at 207-798-6512.

GENERAL INFORMATION		
1. Company Name:	2. Primary Contact & Title at Company:	
3. Company Address:		
4. Phone:	5. Fax:	6. E-mail:
7. Website:	8. The company has been in business since:	
9. If applicable, please provide the name and state (or country) of your parent company:		
10. Major markets & customers:		
11. Business product(s) and/or services:		
12. Are your products/services sold: Wholesale? YES ( ) NO ( ) Retail? YES ( ) NO ( )		
13. Is this a manufacturing operation? YES ( ) NO ( )		
14. Does the company participate in international trade? YES ( ) NO ( )		
If so, how?		

## FACILITY INFORMATION

1. What size facility is your company interested in? _____ Sq. Ft.
2. Does your company need high clear-span ceilings? YES ( ) NO ( ) High door heights? YES ( ) NO ( )      Loading docks? YES ( ) NO ( )
3. Does your company have high water/sewer needs? If so please describe.  
4. Does your company have any special electrical needs such as three phase? If so please describe.  
5. Does your company have any special broadband needs? If so please describe.  
6. Does your company have future expansion plans? YES ( ) NO ( ) If so, please describe your space needs and timeframe of expansion(s)?  
7. Please describe any other special facility needs your company may have?  

## FINANCIAL INFORMATION

1. What is the anticipated dollar investment and timeframe related to the company's immediate plans?		
Building:	\$	Estimated move-in date:
M&E:	\$	Estimated date to be placed in service:
2. Does the company need or want financial assistance? YES ( ) NO ( ) If yes, how much financing is desired and what will the funds be used for? <i>Please provide as much detail as possible &amp; feel free to use additional space.</i>  		
3. Do you have clearly delineated product research and development activities? YES ( ) NO ( )		

## EMPLOYMENT INFORMATION

1. Does your company have any specific employment training needs? If so, please attach a description of the types of training you anticipate needing for both *new* and *existing* employees, including the anticipated cost for the training, if possible. If a proposed training plan has been developed, please attach a copy.

2. Does the company offer health insurance to employees? YES ( ) NO ( ) If so, does the company pay 50% or more of the premium cost for this insurance? YES ( ) NO ( )

3. Does the company provide an ERISA-qualified retirement plan to employees? YES ( ) NO ( )

4. What is your current number of employees?	Full-time:	Part-time:
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5. Will your company be adding new positions over the next two (2) years? YES ( ) NO ( ) If so, please indicate the number of positions to be created for each of the next two years. Also, please provide anticipated job titles and wages for all net new, full-time jobs. Attach additional sheets as necessary.

Year 1:	Full-time:	Part-time:
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Full-time job title(s), with anticipated wages:

Year 2:	Full-time:	Part-time:
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Full-time job title(s), with anticipated wages:

## ENVIRONMENTAL INFORMATION

To help determine if the Department of Environmental Protection needs to assist your company, please review the following:

1. Will any hazardous wastes be generated, stored or treated at this location?	YES ( ) NO ( )
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2. Does your process involve the use of coatings or solvents (e.g. printing, painting, refinishing, cleaning)?	YES ( ) NO ( )
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