



Indianapolis Business Acceleration Team Assistance Application

Please answer the following to the best of your ability so that we can better serve you. You will be contacted within two business days after submitting.

Business/Organization Information

Contact name

Business/organization name

Contact phone number

Contact email address

Business type:

Retail

Restaurant

Educational

Life science

Logistics

Manufacturing

Information technology

Other

Number of employees expected upon opening location:

Proposed location information

Street address of proposed storefront

Was there a business previously operating at this location?

Yes

No

If yes, what type of business was it?

What is the current zoning classification for this property?

Do you own or have you signed a lease for your proposed location?

Yes

No

What is the square footage of the proposed location?

Do you have construction plans drafted for your proposed changes?

Yes

No

Have you previously filed permits with the City of Indianapolis Department of Code Enforcement for this property?

Yes

No

Please explain building improvements or changes to the property.

Are you proposing any signage, banners, and/or artwork on or around the property?

Yes

No

What is your anticipated opening date?

Would you be interested in hearing more about the Indy Chamber's microloan program?

Yes

No

Include any additional information here: