**Basic Information**

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| **Project Title:**  | **Parcel No.:**  |
| **Legal name of business:** **DBA:**  | **Displacee No.:** Preferred Contact |
| **Business phone:**  | **[ ]**  |
| **Owner(s) name(s), if different from above:**  | **Email:**  | **Alternate phone:**  | **[ ]**  |
| **Alt. Email:**  | **Cell Phone:** | **[ ]**  |
| **Type of operation:** **[ ]  Landlord** **[ ]  Retail** **[ ]  NPO** **[ ]  Manufacturing** **[ ]  Other** **Occupancy Date:** | **Business site address:**  | **Business mailing address:**  |

**Present Operation**

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| **Type of Displacement:****[ ]  Business** **[ ]  Farm** **[ ] NPO** **[ ]  Corporation** **[ ]  Partnership** **[ ]  LLC** **[ ]  Sole Proprietor** |
| **Can you supply documentation to verify your business status? [ ]  Yes [ ]  No (if no relocation is PPO)** | **Documentation Type:** **Verified [ ]  Yes [ ]  No** |
| **Describe Nature of Business:**       |
| **Total building(s) square footage:**  | **Lot size:**  | **Number of employees:**  |
| **Replacement preference:****[ ]  Purchase** **[ ]  Lease** **[ ]  Own Land** | **Number & types of other businesses owned:****Number:** **Types:**  |
| **Any special utility needs:**  | **ADA Requirements:**  |
| **Do you depend on truck deliveries?** **[ ]  Yes** **[ ]  No Size:**  **Access From:**  |
| **Special displacement building features:**  |
| **Land:** **[ ]  Own** **[ ]  Lease** | **Lease rate:**  **Expiration of lease:**  |
| **Building:** **[ ]  Own** **[ ]  Lease** | **Lease rate:**  **Expiration of lease:**  |
| **Special lease terms:**  | **Renewal options in lease:**  |
| **Do you sublease any portion of this property:** **[ ]  Yes** **[ ]  No** | **Was the business grandfathered in:** **[ ]  Yes** **[ ]  No** |
| **Do you own or lease any other property for this business:**  | **Special zoning requirements:**  |
| **Shareholders or partners of business:**  | **Do you plan to keep your business in operation:** **[ ]  Yes** **[ ]  No** |
| **Hours & days of operation:**  | **Seasonal business:**  |

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| **Busy time of year:**  | **Slow time of year:**  |
| **Best time of year to move:** **[ ]  Fall** **[ ]  Winter** **[ ]  Spring** **[ ]  Summer** | **Do you store hazardous materials:** **[ ]  Yes** **[ ]  No****If yes, describe:**  |
| **Where is customer base located:**  | **Do you have a computerized inventory:** **[ ]  Yes** **[ ]  No** |
| **Do you have a floor plan layout:** **[ ]  Yes** **[ ]  No** | **Type and nature of other needs:**  |

**Personal Property Questions**

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| **What equipment/personal property affixed to your property will need to be moved:**  |
| **Will any equipment be difficult to move:**  |
| **Special personal property:**  |

**Service Providers**

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| **Phone:**  | **Cable/Internet:**  |
| **Computer:**  | **Security:**  |
| **Other:**  | **Vendor-owned equipment (vending machines):**  |
| **Additional comments:**  |

**Desired Replacement Site Requirements**

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| **Building size:**  | **Lot size:**  |
| **Shipping/Receiving accommodations:**  | **Location:**  |
| **Physical Layout:**  | **Special utility needs:**  |
| **Floor loading:**  | **Height:**  |
| **Storage:**  | **Parking:**  |
| **Other replacement site requirements:**  |
| **Do you have a replacement site located:** **[ ]  Yes** **[ ]  No If not, what are your location needs?** |
| **Anticipated difficulty in locating replacement property and rationale:**  |

**Additional Information**

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| **Identification of advance payments that might be necessary to complete the business move:**  |
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**Relocation Cost Estimate**

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| **Reestablishment Expenses:** $       | **Moving Cost:** $      | **Site Search Cost:** $      |
| **Specialist**:       | **Date**:       |