

Application

**Oregon Business Retention Service
Oregon Economic and Community Development Department
Business Development
775 Summer Street NE, Suite 200
Salem, OR 97301-1280
503-986-0161
Fax: 503-581-5115**

Applicant Name

Company Name

Tax ID Number

Street Address

City

Zip

County

()

()

Telephone Number

Fax Number

e-mail

General information

1. Briefly describe your company, including how long it has been in business, current products and future products.

2. Briefly describe the products you sell, the markets you sell to and how you sell to them. In addition, what is the size of your market area?

3. How is your company organized: sole proprietorship, subchapter S, corporation, limited partnership, etc.? What is the official name of the company? What is your fiscal year?

4. Does your company qualify for one of the following designations?
Minority Business Enterprise (mbe) Yes No
Woman Business Enterprise (wme) Yes No

5. Do you own or lease land, building or equipment? Where are they located?

If you lease or rent, what is your monthly payment?

6. Company Management

Name

Title

Ownership

_____	_____	_____
_____	_____	_____
_____	_____	_____

Please report your employment trends:

7. Number of employees last year _____ this year _____ next year _____

8. Please report your average hourly wage for production workers:

entry level _____ after 2 years _____

9. Are the employees organized and if so, what union represents them?

10. Describe what you consider to be the top five problems/challenges in your company. Briefly explain each and what you think the solutions are:

11. Have you previously sought business assistance or advice and if so, what type and with whom?

Financial information

1. How is your company financed (bank, loans, Personally, equity, line of credit, etc.)? Do you consider your company to be adequately capitalized?

2. Please provide a brief historical financial summary of your company

	2010	2009	2008	2007
Sales	_____	_____	_____	_____
Gross margin	_____	_____	_____	_____
Profit or (loss) before taxes	_____	_____	_____	_____

In addition, describe the financial history of your company.

3. What is your major financial concern? Explain.

4. _____ ()
Name of bank telephone

_____ ()
Loan officer telephone

_____ ()
Type of account (line of credit, checking, note payable) telephone

_____ ()
Attorney telephone

_____ ()
CPA telephone

Other consultants regularly used:

_____ ()
Name telephone

_____ ()
Name telephone

_____ ()
Name telephone

5. SIC/NAICS code(s) _____

6. Please give your perception of your company's "strengths" and "weaknesses."

	Strength	Weakness	Unsure
General management	_____	_____	_____
Financial management	_____	_____	_____
Marketing	_____	_____	_____
Sales management	_____	_____	_____
Customer service	_____	_____	_____
Production management	_____	_____	_____
Information systems/computers	_____	_____	_____
Workforce	_____	_____	_____
Sources of supply	_____	_____	_____
Diversified customers	_____	_____	_____
Facilities/equipment	_____	_____	_____
Adequate capital	_____	_____	_____
Up-to-date technology	_____	_____	_____
Government regulation	_____	_____	_____
Cost structure	_____	_____	_____
Profitability	_____	_____	_____

**double check "greatest strength" and "greatest weakness."*

Release

Date: _____

Between: _____ “Company”

And: **State Of Oregon**, acting by and through its
Economic and Community Development Department
775 Summer Street NE, Suite 200
Salem, OR 97301-1280

In consideration of Company receiving assistance and advice from Oregon Economic and Community Development Department or advisors under contract to Oregon Economic and Community Development Department, Company voluntarily and knowingly executes this Release with the express intention of extinguishing the obligations designated herein.

Company, with the intention of binding itself, its legal representatives, successors and assigns, expressly releases and discharges Oregon Economic and Community Development Department, its legal representatives successors and assigns, and Oregon Economic and Community Development Department’s employees, agents or contractors from all claims, demands, actions, judgments and executions that Company ever had, or now has, or may have, known or unknown, or that anyone claiming through or under it may have, or claim to have, against Oregon Economic and Community Development Department, its legal representatives, successors and assigns and Oregon Economic and Community Development Department’s employees, agents or contractors created by, or arising out of Oregon Economic and Community Development Department’s provision of assistance and advice to Company.

In witness whereof, Company has executed this Release on the day and year first above written.

Name of Company

Company Official (Please Print)

By

Title