



Mountain Timber Market Application

General Instructions:

Thank you for your interest in leasing a space in Port of Kalama's Mountain Timber Market. In order to apply and participate you must fully complete and return the attached documents to the Port of Kalama at 110 W Marine Drive, Kalama, WA 98625 or via email at info@mountaintimber.org.

All application materials become property of the Port of Kalama and will not be returned. If you would like to retain a copy, please make one prior to sending in your materials.

Please be advised that you must meet the following eligibility requirements (which may be changed at any time by the Port of Kalama in its sole discretion) in order to participate in the Business Accelerator Program.

- You must be 18 years of age or older.
- You must be a legal resident of the United States.
- You must live within 100 miles of 110 West Marine Drive, Kalama, WA 98625.
- Neither you nor any of your immediate family members or anyone living in your household may currently be an employee of the Port of Kalama.
- If chosen for participation, you must successfully pass a background and credit check for participation

I understand that this application does not guarantee my entry into the Business Accelerator Program and/or a space in the Port of Kalama's Mountain Timber Market.

Name of Applicant

Applicant Signature

Date

Application

Applicant Name: _____

Business Name: _____

Business Website (full URL): _____

If applying as part of a group, the name(s) of your collaborator(s):

Your relationship to your collaborator(s):

Your Street Address: _____

Your Mailing Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone #'s: Home: _____

Cell: _____

Work: _____

E-mail: _____

Occupation/Place of Employment: _____

Previous Occupation/Place of Employment: _____

School(s) Attended & Degree(s) Completed: _____

Have you operated/managed any other businesses? (*Please describe*)

Describe in **DETAIL** what your business or product is. What does it do? What makes it special? Provide as much detail as possible. Attach photos if currently operating a business (No more than (4) four 8 ½ x 11" pages of photos please.)

How much equity do you own in your business? _____

What stage is your company in?

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> Good Idea | <input type="checkbox"/> Shipping/Live | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Revenue | <input type="checkbox"/> Product Development | <input type="checkbox"/> Expansion |

When did you start the business and how long have you been operating as a business, if applicable?

What was the GROSS income from your business last year, if applicable? *Gross income is commonly defined as a business's revenue before taking any costs, taxes, or other deductions into account.*

What was the NET income from your business last year, if applicable? *Net income is commonly defined as a business's revenues minus any costs of doing business.*

What attempts have you made to build your business? Have you been successful?

Who is your target customer for your business? (*i.e.: male, female, ages, income level, etc.*)

Is your merchandise hand-crafted by yourself, purchased wholesale, or franchised? Please explain.

Why do you think your business is a good match for the Port of Kalama's Mountain Timber Market?

Describe the circumstances surrounding how you conceived and developed your business and/or business idea.

What are the biggest hurdles your business has had to face and/or what hurdles do you anticipate your business will have to overcome? How did you and your business overcome them or how do you plan to overcome them?

What type of lease are you interested in?

- One (1) Year - 450 square foot vendor space, with option to extend every year
- Three (3) Year – 675 square foot restaurant space or greater, with option to extend every year
- Month-to-Month Lease in an approximate 80 square foot semi-permanent space in the vendor hall

List any organizations or clubs with which you're associated.

How did you hear about the Port of Kalama’s Mountain Timber Market Business Accelerator Program?

How do you define success of your business?

What are your business goals for the next five years?

Complete the Small Business Readiness Assessment on the next page.

Small Business Readiness Assessment

(Source: U.S. Small Business Administration)

The Assessment Guide has twenty-five questions.

Readiness Questions	Yes	No
General		
1. Do you think you are ready to start a business?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you have support for your business from family and friends?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever worked in a business similar to what you are starting?	<input type="checkbox"/>	<input type="checkbox"/>
4. Would people that know you say you are entrepreneurial?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you ever taken a small business course or seminar?	<input type="checkbox"/>	<input type="checkbox"/>
Personal Characteristics		
6. Are you a leader?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you like to make your own decisions?	<input type="checkbox"/>	<input type="checkbox"/>
8. Do others turn to you for help in making decisions?	<input type="checkbox"/>	<input type="checkbox"/>
9. Do you enjoy competition?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you have will power and self-discipline?	<input type="checkbox"/>	<input type="checkbox"/>
11. Do you plan ahead?	<input type="checkbox"/>	<input type="checkbox"/>
12. Do you like people?	<input type="checkbox"/>	<input type="checkbox"/>
13. Do you get along with others?	<input type="checkbox"/>	<input type="checkbox"/>
14. Would people that know you say you are outgoing?	<input type="checkbox"/>	<input type="checkbox"/>
Personal Conditions		
15. Are you aware that running your own business may require working more than 12 hours a day, six days a week and maybe Sundays and holidays?	<input type="checkbox"/>	<input type="checkbox"/>
16. Do you have the physical stamina to handle a "self-employed" workload and schedule?	<input type="checkbox"/>	<input type="checkbox"/>
17. Do you have the emotional strength to deal effectively with pressure?	<input type="checkbox"/>	<input type="checkbox"/>
18. Are you prepared, if needed, to temporarily lower your standard of living until your business is firmly established?	<input type="checkbox"/>	<input type="checkbox"/>
19. Are you prepared to lose a portion of your savings?	<input type="checkbox"/>	<input type="checkbox"/>
Skills and Experience		
20. Do you know what basic skills you will need in order to have a successful business?	<input type="checkbox"/>	<input type="checkbox"/>
21. Do you possess those skills?	<input type="checkbox"/>	<input type="checkbox"/>
22. Do you feel comfortable using a computer?	<input type="checkbox"/>	<input type="checkbox"/>
23. Have you ever worked in a managerial or supervisory capacity?	<input type="checkbox"/>	<input type="checkbox"/>
24. Do you think you can be comfortable hiring, disciplining and delegating tasks to employees?	<input type="checkbox"/>	<input type="checkbox"/>
25. If you discover you do not have the basic skills needed for your business, will you be willing to delay your plans until you have acquired the necessary skills?	<input type="checkbox"/>	<input type="checkbox"/>