

Down East Business Alliance (DBA) is accepting applications for our Incubator Without Walls (IWW) Business Essentials Series

What is a business incubator?

A business incubator is typically a building shared by a number of micro-entrepreneurs. The businesses within the incubator often distribute the overhead, benefit from the opportunity to network with other businesses, and draw from each other's customer base. Each business within the incubator is given the opportunity to develop and grow into a self-sustaining entity until it can move beyond the incubator walls into its own storefront.

What is Incubator Without Walls?

Incubator Without Walls (IWW) is a business project designed for existing or potential micro-businesses located in Washington and Hancock counties.

Participating IWW members do business at their own location, while enjoying the tremendous benefits associated with a traditional business incubator.

DBA's Incubator Without Walls has provided mentoring, marketing, networking, and small business assistance to almost 400 Washington and Hancock county micro-entrepreneurs.

What tools does IWW provide to business owners?

- ◆ Assistance building a viable business plan
- ◆ Opportunities to network, mentor, and develop powerful business relationships with other entrepreneurs
- ◆ Access to local, state, and federal resources
- ◆ Business management training
- ◆ Financing and cash flow training
- ◆ Marketing and advertising assistance
- ◆ Regional training programs
- ◆ Financial and loan packaging assistance

What can IWW do for my business?

As an IWW member you'll learn how to:

- ◆ Improve your management skills and business knowledge
- ◆ Gain new customers through careful marketing analysis
- ◆ Identify new markets and opportunities
- ◆ Increase sales and reduce your expenses, thus increasing profits
- ◆ Hire and retain quality employees
- ◆ Open pathways to local, state, and federal small business resources

What is expected of me as an IWW member?

- ◆ Willingness to grow your business, including adding employees or creating a job for yourself
- ◆ Attend all IWW meetings
- ◆ Share your expertise and experience by networking with other business owners
- ◆ Meet income guidelines
- ◆ Participate fully in the IWW program

How do I become an IWW member?

Complete an application and provide a brief business outline for your existing or proposed business. If you do not have a business plan, you may complete the business plan worksheet that accompanies the application. Your local Small Business Coordinator is available for assistance.

How much does this class series cost?

Tuition is free but you must apply and pre-register.

Where can I find out more and get an application for IWW membership?

Machias Office Elizabeth Sprague Small Business Coordinator PO Box 82 Machias, ME 04654 207-479-3071 esprague@whcacap.org	Ellsworth Office Jeff Ackerman Small Business Coordinator PO Box 299 Ellsworth, ME 04605 207-664-2424 ext.4470 jackerman@whcacap.org	Calais Office Roland Bechard Small Business Coordinator PO Box 1191 Calais, ME 04619 207-214-2192 rbechard@whcacap.org	Ellsworth Office Sarah Nugent Business Development Manager PO Box 280 Milbridge, ME 04658 PO Box 299 Ellsworth, ME 04605 207-546-7544 ext.4495 207-664-2424 ext. 4495 snugent@whcacap.org
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You can download an IWW membership application,
fact sheet and business planning worksheet from
our website:

<http://www.downeastbiz.org>



Supporting Maine's Small Businesses



DOWN EAST BUSINESS ALLIANCE

Supporting Maine's Small Businesses

Incubator Without Walls (IWW) Application

Please tell us about your business

Your name _____

The name of your business _____

The business physical address _____

The business postal mailing address _____

Other mailing address _____

The business email address _____

The business phone number _____

The business fax number _____

Your business web site _____

Your business social networking site _____

How long have you been in business? Over 3 years (Mature) 1-3 years (Emerging) <1 year (Underway)

Under what business form do you operate? Sole proprietor Partnership
 Corporation (LLC, S-corp, B-corp, etc.)
 Co-operative Non-profit

Business net income:* _____ **Household annual income:*** _____

Including yourself, how many employees does your business currently support? FT/benefits FT
 PT seasonal PT year round
 PT as needed

Do you anticipate a need to hire in the next 18 months? Yes FT/benefits FT
 No PT seasonal PT year round
 PT as needed

What may prevent you from hiring? _____

* **Why we ask:** Incubator Without Walls measures program success, in part, by changes in business and household income. Your information is maintained as confidential and is never individually identifiable in our reporting.

Incubator Without Walls (IWW) Application (continued)

Please read the paragraph below and sign your application. All owners, officers, or partners must also sign. You may attach additional signature pages as necessary.

- *The information provided in this application is accurate to the best of my knowledge.*
- *I understand that personal and/or business information may be requested of me pursuant to this application and I give my consent for such information to be provided. I agree to provide financial and other information necessary to measure the success of the series.*
- *I understand that WHCA retains the sole decision as to whether I am approved for membership into this IWW series.*
- *I understand that if I am accepted, I will be required to sign a formal agreement between WHCA and me.*

Signature

Signature

Printed name

Printed name

Date

Date

Small Business Coordinator

Date

Please attach to your completed application:

- your *Incubator Without Walls Information Sheet*
- a copy of your **business plan** if you have one
- a copy of your **marketing plan** if you have one
- **brochure, business card, rack card, and other marketing collateral** in use

In Washington County return your application to:

Elizabeth Sprague

Small Business Coordinator
Down East Business Alliance
PO Box 82
Machias, ME 04654

Office Location

7 VIP Lane
Machias, ME 04654
O: 479-3071
E: esprague@whcacap.org

Roland Bechard

Small Business Coordinator
Down East Business Alliance
PO Box 1191
Calais, ME 04619

Office Location

Washington County Community College
Howland Hall
1 College Drive
Calais, ME 04619
O: 214-2192
E: rbechard@whcacap.org

In Hancock County return your application to:

Jeff Ackerman

Small Business Coordinator
Down East Business Alliance
PO Box 299
Ellsworth, Maine 04605

Office Location

248 Bucksport Road
Ellsworth, ME 04605
O: 664-2424 ext. 4470
E: jackerman@whcacap.org



Supporting Maine's Small Businesses

A Division of the Washington-Hancock Community Agency

BUSINESS PLANNING WORKSHEET

Date Completed: _____

The purpose of a Business Plan is to provide an operating guideline to manage your business effectively and successfully. This form has been designed to provide a basic outline for a Business Plan. You may use it as a general reference for completing your own Plan or simply fill in the blanks in as much detail as possible and return it with your application. If you need more room, please feel free to include the extra information on separate pieces of paper.

Name of Business:

Name(s) of Owner(s):

Business Address:

Business Phone:

1) Business type: Wholesale Retail Service Manufacturing

2) How long have you been in business? _____ years _____ months not yet in operation

3) Describe your plans for the future of your business:

4) Where will your business be located? What makes this a good location?

MANAGEMENT

Describe your background. Note your areas of special knowledge and experience as related to your business. Attach your resume. If anyone helps you manage your business, please provide information about his/her background as well. What else would be helpful to know about you?

MARKET AND PRODUCT INFORMATION

1) Where are most of your customers located?

Local (within 50 miles) Statewide Out of state Out of USA

2) Briefly describe your product or service:

3) What type of individual or company buys or will buy your product or service?
(Be specific. Not everyone will be a customer of yours.)

MARKET AND PRODUCT INFORMATION (CONTINUED)

4) Have any individuals or businesses formally agreed to purchase your product or service

Yes No If "yes", please attach copies of the agreements or contracts.

Comments:

5) Who are your biggest competitors? What sets you apart from them (why would a customer come to you instead of them)?

6) Do you advertise, or do you have plans to advertise? Yes No

If "yes", please describe. Feel free to attach business cards, ad clippings, letterhead, brochures, etc.
