NEWTON KITCHEN APPLICATION

Please email completed application to lindsay@downtownjoplin.com or return to the Joplin Empire Market (931 E 4th St Joplin MO 64801)

Name & Contact Information of Interested User of Market Facility/Services (form to be

7-2023

completed by authorized individual directly utilizing facility/services):
Applicant Name:
Address:
City / State / Zip Code:
Telephone Number(s):
Email:
Do you intend to use the Market facility as an individual or for a business?
Individual / Business (circle one)
Description of proposed use of space (self-guided training, employee training, youth or job training, expanding existing business, incubating business, etc.)
Length of time/frequency you intend to use the facility or services
Type of rental needed (hourly, daily, weekly, monthly)
Is your use of the facility to explore an idea for a potential business?
Yes or No (please circle one)

If 'Yes', please describe the type of business that you are considering:

If use of space by a business, are you the owner of the bu	usiness? Y/N	
Name of Business:		
Address:		
City / State / Zip Code:		
Would facility be used as an expansion of existing busine	ss? Y/N	
Would facility be used as a second location of existing bu	siness? Y/N	
Number of years in business		
Number of existing full-time employees (represent part-time employees as a decimal, ex. Half-time =.5)		
How did you find out about the Empire Market Community	y Kitchen?	
Applicant Signature:	_ Date:	
Market Signature:	_ Date:	
Approved Rejected		