## Project Profile Questionnaire

Your Name		Phone	<del></del>
Company	<del> </del>	Fax	
Address	· · · · · · · · · · · · · · · · · · ·	City	<del> </del>
State	Zip E-ma	il	<del></del>
Becker Contact: Name		Date _	
	Construction Infor		
Project Location: City _		State	
Type of Construction     A. New Building     B. Retrofit facility     C. Renovation     D. Other		<del></del>	
Contact		Phone	<del></del>
3. What is the anticipate	ed date for constru	ction to begin?	
4. What is the target date for opening your facility?			
5. Facility Use?	IceSoccer	In-Line	Other
6. Is there spectator sea	ating?	Number?	
7. What type of refrigera	ated floor? Sa	and Concrete	
8. Who is your builder/0	Contractor?		Continued on page 2



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## **Financing Information**

1.	What is the estimated cost/budget of the project?
2.	How will the project be funded?  Private investment  Municipal funding  Other funding source
3.	Is financing currently in place? Yes No Partial
4.	Have you formulated a written business plan? Yes No In Progress

## **Equipment/Product Information**

Have you made decisions on the following equipment or do you need assistance in procuring

Dasher Boards	Ice Resurfacer
Bleachers	Lobby Benching
Locker Room Benching	Scoreboard
Resilient Flooring	Lobby Flooring
Rental Skates	Skate Sharpener
Lockers	Turf
In-Line Floor	Multi-Use Gym Floor
Netting	Goals & Nets

## How best can we assist you with this project?