

THE SINAI HOSPITAL BIOINCUBATOR



Thank you for your interest in the Sinai Hospital BioIncubator. Please complete this form and submit it to the LifeBridge Health Research Institute Committee at the address below.

Company Name: _____ Date Submitted: _____

1. Contact Information:

Name: _____ Email: _____
Telephone: _____
Company's Website: _____
Address: _____

2. Date company was established: _____

3. Nature of company (brief description of product or service and nature of market or market potential; if available, attach product brochures and company literature):

4. Current company status (e.g., concept stage, seed stage, initial product development, prototype development, advanced product development):

5. Number of employees to be housed at the Sinai Hospital BioIncubator and timeline for future employees:

6. Please attach a copy of your business plan and a brief description of business milestones.

7. Approximate space requirements:

Small laboratory (approximately 108 sq. ft.) - 3 available

Medium laboratory (approximately 165 sq. ft.) - 3 available

Large laboratory (sizes range from 285 to 340 sq. ft.) - 4 available

You may request more than one laboratory space. Please indicate the number of laboratory spaces needed and specify the laboratory sizes. _____

8. Special facility, service or equipment requirements:

9. Your targeted BioIncubator move-in date:

10. Is your company insured? Yes No

11. How did you hear about the Sinai Hospital BioIncubator?

Name: _____ Date: _____

Signature: _____

Title: _____

Please email or mail completed form to:

Michael Tangrea, Ph.D.

Director, Translational Research

Alvin & Lois Lapidus Cancer Institute

bioincubator@lifebridgehealth.org

Sinai Hospital of Baltimore

2401 W. Belvedere Ave.

Shapiro Building, Suite 203

Baltimore, MD 21215

410-601-5643

