



## PROJECT INFO REQUEST

### 1. COMPANY AND CONTACT INFORMATION

Company Name: \_

Contact Name & Title: \_

Company Address: \_

Phone Number: \_

City: \_

Email Address: \_

Country: \_

Company Status:  Private  Publicly Traded

### 2. PROJECT SCOPE

**Describe operation at the proposed facility in EEC**

- Manufacturing  Assembly  Distribution  
 Service/Sales  Corporate HQ  Research & Development

**Key factors the company will evaluate for a location decision:**

- Proximity to Market/  
Customers  Cost & Availability of  
Labor  Incentives  Tax Climate

Logistics

Raw Materials

Others

### 3. CAPITAL INVESTMENT PLANS

Estimate of Total New Investment: \_

Real Estate Preference:  Existing Building  New Construction

Interest:  Purchase  Lease

Lease Terms (No. of Years): \_

### 4. EMPLOYMENT PLANS

#### Estimate of New Jobs:

1 Year:                      2 Year:                      3 Year:                      4 Year:                      5 Year: \_

Total: \_

Critical Labor Needs: \_

### 5. PROJECTED TIME FRAME

Date to enter contract for lease/purchase of building/land:

Date to commence operation/construction: \_

Date of first hire: \_

### 6. MARKETS OF INTEREST

South East/South-South Nigeria  Nigeria Nation

West Africa (ECOWAS)  Africa (AfCFTA)

Do not know

## 7. PRODUCTS

Type of product:

Estimated annual production:

Estimated annual output value:

Market share: local % export %

Percentage of raw material: local content % foreign content: %

## 8. BUILDING

### Space Required (m<sup>2</sup>)

Minimum:

Maximum: \_

### Type of Building:

Industrial  Office  Lab  Flex Space  Other \_

Building Dimensions: Length: Width: Height (Clearance):

Truck Docks/Doors: \_

Office Space Needed (m<sup>2</sup>): \_

Preference:  Stand-Alone Building  Multi-Tenant

Other Needs:

### Land:

Size of Land in Hectares:

## 9. PROJECTED UTILITY NEEDS

Power/Month:

Water/Month:

Waste Generation/Day:

Work days/week:

Number of shifts/operations:

## 10. TRANSPORTATION/ LOGISTIC NEEDS

Distance to Airport: \_

Rail Access Required:  Yes  No

Distance to Interstate or Highway: \_

Port Access Needed:  Inbound  Outbound  Both

**COMPLETED BY:**

Name:

Signature:

Designation:

Date:

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