

ARMS Program Armament Retooling & Manufacturing Support

INITIAL TENANT APPLICATION

APPLICANT INFORMATION											
1) Business Nai						2) D.U.N.S. #:					
3) Business Activity:			4) Ownership: ☐ United States ☐ Foreign					5) Country of Ownership if not U.S.			
6) Business address:											
7) City:	8) State:					9) ZIP Code:					
10) Point of Contact (POC):			11) POC Phone #:					12) POC Email Address:			
13) POC Title:											
TENANT INFORMATION											
14) ARMS Location: IAAAP Burlington, Iowa (American Ordnance)		Iowa	Hwad Hawthorne, NV (Amentum)			LCAAP Independence, MO (Olin Winchester)		☐ HSAAP Kingsport, TN (BAE Systems)		RFAAP Radford, VA (BAE Systems)	
15) Business Type: ☐ Start-up ☐ Relocation 16) Relocating from: ☐ Commercial ☐ DoD Location											
17) Type of Space: Operational Storage Office Rail Land Other:											
18) Sq Ft	Operational St		rage	Office	Rail			Land (acres)		Other	
Requirements:											
19) Operational Space		20) Cla (lbs)		ass 1.1 Energetics Stora			21) Class 1.3 Ener (lbs)		-		
Classification:	□ 1.1 □ 1.3		In P	rocess:	F	inished Pr	od:	In Process:		Finished Prod:	
22) Utility Requirements:	Ly ` ´		Comp (PSI) (PSI)		r	Potable Water Gal/day		Production Water Gal/day	W	astewater Treatment Gal/day	
23) Operations Timeline:											
24) ARMS Funding 25) In			vesting own funds if necessary: ☐ Yes ☐ No					26) Jobs Created:			
TENANT BUSINESS REFERENCE #1											
27) Business Name:											
28) Business address:											
29) City: 30			31 State:				31) 2	Zip Code:			
32) Point of Contact (POC): 33			3) POC Phone #:				34) F) POC Email Address:			
35) POC Title:											
TENANT BUSINESS REFERENCE #2											
36) Business Name:											
37) Business address:											
38) City: 39) State:				40) Z	40) Zip Code:			
41) Point of Contact (POC): 42			2) POC Phone #:				43) F	43) POC Email Address:			
44) POC Title:											

*Please note, this information is to better understand your business needs and see if the ARMS Program is interested and can accommodate your business currently, or if potential funding and additional work is needed. Credit Worthiness references will need to be reviewed and full technical proposals for facility use and funding under the ARMS Program will be needed in the future. EMAIL COMPLETED APPLICATION TO: dfink@theshentongroup.com

- 1) Please enter your legal business name
- 2) List your D.U.N.S Number
- 3) List your business activity, examples include shipping, storing, manufacturing, commercial and/or DoD, etc.
- 4) Check if the business owner is U.S. or foreign
- 5) List the Country of ownership if not U.S.
- 6) List your legal business address
- 7) List your business city
- 8) List your business State
- 9) List your Business Zip Code
- 10) List the businesses point of contact (First & Last Name)
- 11) List the Point of Contacts Phone Number
- 12) List the Point of Contacts email address
- 13) List Point of ContactBusiness title
- 14) Available ARMS Locations: Iowa Army Ammunition Plant (IAAAP), Hawthorne Army Depot (HWAD), Lake City Army Ammunition Plant (LCAAP), Holston Army Ammunition Plant (HSAAP), Radford Army Ammunition Plant (RFAAP)
- 15) List whether the business is a start-up or Relocating to an ARMS Location
- 16) List whether the business is relocating from a commercial or DoD Location
- 17) Check what type of space you are looking for
- 18) List space requirements in square feet for each of the space types required, for land use acres as the unit of measure
- 19) What classification is required for operational space
- 20) List how many pounds of energetics you need to be able to store for each classification 1.1 (process and finished products
- 21) List how many pounds of energetics you need to be able to store for each classification 1.1 (process and finished products
- 22) Provide requirements for each utility, Power/Electrical in Kilowatts (KW), Steam in Pounds Per Square Inch (PSI), Compressed Air in Pounds Per Square Inch (PSI), Potable Water in Gallons per Day, Production Water in Gallons per Day, Wastewater Treatment in Gallons per Day.
- 23) What is your timeline for operations to be up and running
- 24) Will you be requesting ARMS funding for some or all of your facility use proposal
- 25) Will you be investing any of your own funds if necessary
- 26) How many jobs do you estimate your company would bring to the area
- 27) Business Name for Reference #1
- 28) Business address for Reference #1
- 29) City of Business Reference #1
- 30) State of Business Reference #1
- 31) Zip Code for Business Reference #1
- 32) Name of Point of Contact Person (First & Last) for Business Reference #1
- 33) Phone Number for Point of Contact for Business Reference #1
- 34) Email Address for Point of Contact for Business Reference #1
- 35) Title of Point of Contact for Business Reference #1
- 36) Business Name for Reference #2
- 37) Business address for Reference #2
- 38) City of Business Reference #2
- 39) State of Business Reference #2
- 40) Zip Code for Business Reference #2
- 41) Name of Point of Contact Person (First & Last) for Business Reference #2
- 42) Phone Number for Point of Contact for Business Reference #2
- 43) Email Address for Point of Contact for Business Reference #2
- 44) Title of Point of Contact for Buesiness Reference #2