



# SUMMIT ARTSPACE

## ARTIST STUDIO & CREATIVE BUSINESS CENTER TENANT APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

County  Summit  Portage  Medina  Other (specify) \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Type of Artist (i.e. painter, jewelry, sculptor, musician, photographer, etc.) \_\_\_\_\_

Please check one or more that applies:  Professional/Full-time  Professional/Part-time  
 University Student  Arts Organization/Business  
 Other (specify) \_\_\_\_\_

Medium (if applicable) \_\_\_\_\_

Relevant Art Education or Training \_\_\_\_\_

Briefly describe how you intend to use the space (see "tenant expectations" for reference)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anticipated hours of operation or office hours:  7 AM-12 PM  12 PM- 5 PM  5 PM-midnight

How many people do you anticipate visiting your space on a regular basis? \_\_\_\_\_

One of the primary expectations of tenants is to be outward facing and contribute to the "community art center" concept, meaning that you will either be open to the public during at least some of Summit Artspace's "open" hours (Th./Fri. from 12-7 PM and Sat. 12-5 PM), as well as Akron Artwalks and exhibition openings, AND/OR that you will offer art-related public workshops, lectures, demonstrations, classes or something related to what you do at Summit Artspace. If you are selected for tenancy, what are you willing to do to be "outward facing"?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you anticipate making any special studio renovations or improvements? Space improvements are not the responsibility of Summit Artspace. They are the responsibility of tenants upon approval from Summit Artspace.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you currently rent studio/office space?  Yes  No If yes, where? \_\_\_\_\_

Landlord Reference \_\_\_\_\_ Phone \_\_\_\_\_

Are you a member of any area arts organizations?  Yes  No  
If yes, please list. \_\_\_\_\_

If you're a visual artist, do you intend to sell artwork out of your studio?  Yes  No

If you're a performance artist, do you intend to host performances at Summit Artspace?  Yes  No

Do you anticipate art sales or performance fees will cover your rent?  Yes  No

**INCOME SOURCES**

Source \_\_\_\_\_ Est. Income \_\_\_\_\_

Source \_\_\_\_\_ Est. Income \_\_\_\_\_

Source \_\_\_\_\_ Est. Income \_\_\_\_\_

Bank Reference \_\_\_\_\_ Contact \_\_\_\_\_

Bank Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Type of Accounts you hold \_\_\_\_\_

**PROFESSIONAL REFERENCES**

Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Rent covers use of the space and associated amenities. Summit Artspace insurance covers damage to the building, but not personal property. Tenants are required to carry liability insurance and are advised to carry renter's insurance. I agree to carry at least liability insurance and I understand that if I choose not to carry renter's insurance, any items lost or damage are my responsibility, not the responsibility of Summit Artspace.

By signing, I confirm the information provided is correct to the best of my knowledge. I authorize the verification of all above information by Summit Artspace, and I authorize Summit Artspace to conduct a background check.

Applicant's Name (Print) \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*This application does not constitute a contract, lease or agreement for space.*