KITCHEN INCUBATOR MONTHLY STATEMENT

Name: _______________________________  Business Name: _______________________________

Dates of Lease Agreement: ___________  Expiration Date: _____________________________

License Expires: _______________  Insurance Expires: _____________________________

You/your company have/have used the Kitchen Incubator at the Denver Enterprise Center Business Incubator in accordance with the lease (see above dates), its terms and conditions. The following is the summary of charges now due for ______________ 1999.

KITCHEN RENTAL:

- **Kitchen Start Up Fees:** $________
  - Plan A: Min 10hr./20 - (first six months) $20/hr. x _10_ hrs. = $________
  - Plan B: 6 months 20 hrs./month $20/hr. x ______ hrs. = $________
  - Plan C: 20-39 hrs./month $18/hr. x ______ hrs. = $________
  - Plan D: 40-79 hrs./month $16/hr. x ______ hrs. = $________
  - Plan E: 80-120 hrs./month $14/hr. x ______ hrs. = $________
  - Plan F: 120-149 hrs./month $12/hr. x ______ hrs. = $________
  - Plan G: 150/200 hrs./month (storage rental not included) $1900.00 Flat Rate = $________
  - **Discount Rate:** Used between 10 P.M. and 5 A.M. $14/hr. x ______ hrs. = $________

COLD RENTAL:

- Walk in Cooler Cage $35/Month = $________
- Walk in Freezer Cage $35/Month = $________
- Victory Single Freezer $35/Month = $________
- Victory Single Refrigerator $35/Month = $________
- Cooler Rental (per day) $5/Day = $________

DRY STORAGE:

- Locker Space $5/Month = $________
- Cage/Shelf $15/20/Month = $________
- Medium/Large Space $35/45/Month = $________
- Ingredient Bin $5/Month = $________

OTHER CHARGES:

- Late Charges/Bounced Checks After 5th day of the month $50.00 = $________
- Cleaning Penalty $20/hr - Charge to Tenant = $________
- Fire Alarm Charges Service Rate = $________
- Any Damage to DEC Service Rate = $________
- Sanitation Supplies $2 per 2 persons ($1.00/additional person) x ____ days = $________

**Note:**

- Current Month = $________
- Previous Month Extra Use = $________
- Total Current Charges = $________
- Past Due Amount/Credit = $________
- Current Balance = $________
- Amount Paid = $________
- Balance Due = $________

Check Number: ________________________________

Schedule Date for New Month: ________________________________

Tenant Signature: ________________________________