



WAUBETEK BUSINESS DEVELOPMENT CORPORATION

APPLICATION FOR FINANCING



Proud Partner in the delivery of the **Aboriginal Business Financing Program** in affiliation with:



Indian Agriculture
Program of Ontario



Two Rivers Community
Development Centre

HOW DID YOU HEAR ABOUT OUR PROGRAMS AND SERVICES?

<input type="checkbox"/> Economic Development Officer	<input type="checkbox"/> Signs	<input type="checkbox"/> Word of Mouth (friends/family)	<input type="checkbox"/> Waubetek Website
<input type="checkbox"/> Outreach	<input type="checkbox"/> Information Sessions	<input type="checkbox"/> Waubetek Newsletter	<input type="checkbox"/> Other (specify) _____

APPLICANT INFORMATION:

Applicant Legal Name:	Business Operating Name:
Mailing Address:	Business Address (if different from mailing address):
Residence telephone number:	Business or Work telephone number:
E-mail and/or website address:	Fax number:

OWNERSHIP INFORMATION:

OWNERSHIP STRUCTURE:					<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership*	<input type="checkbox"/> Incorporation	<input type="checkbox"/> Other
Applicant Legal Name	Heritage (please check one below)		Gender	% Owned	SIN (optional):			
	Status	<input type="checkbox"/> Non-Status	<input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth (mm/dd/yy):			
	<input type="checkbox"/> Metis	<input type="checkbox"/> Inuit						
	<input type="checkbox"/> Non-Aboriginal							

*** If there are more than two applicants, please attach sheet with same information above for each applicant.**

APPLICANT/OWNER'S SUMMARY OF NET WORTH:			
ASSETS	\$	LIABILITIES	\$
Cash/Bank balance(s)		Credit Card/Charge account balances	
Real estate		Mortgages	
Equipment		Loans outstanding	
Vehicles		Vehicle loans outstanding	
Other (specify)		Other (specify)	
Total assets (A)		Total Liabilities (B)	
Applicant/Owner's Summary of Net Worth:		(A) - (B) = \$	

ESTIMATED PROJECT COSTS \$		ESTIMATED PROJECT FINANCING \$	
Business Planning Consultant costs Environmental Assessment		Applicant Cash Equity (25%)	
		Aboriginal Business Financing Fund (75%)	
Capital: Building Equipment Inventory (3 months only) Other:		Applicant Cash Equity (minimum 10%)	
		Waubetek Financing Program (up to 40% depending on need.)	
		Commercial Loan (Waubetek or other Aboriginal Financial Institution, Dealer Financing, Bank, or Credit Union) Please Specify: _____	
Operating capital: Insurance (3 months only) Utilities (3 months only) Other:		Other financing e.g. other Fed/Prov programs. Please specify: _____	
Marketing Signage/Advertising Website Tradeshows		Applicant Cash Equity (25%-40%)	
		Aboriginal Business Financing Program (60%-75%)	
Business Support Bookkeeping Training Legal Mentor		Applicant Cash Equity (25%)	
		Aboriginal Business Financing Program (75%)	
Total Project Costs	\$	Total Project Financing	\$

* Total Project Costs should equal Total Project Financing.

APPLICANT CHECKLIST:	Yes	No	N/A
Attach resume (include photocopies of any certifications / licenses you have attained that pertain to this business).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach copies of the past three years of financial statements if this is an <u>existing</u> business.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach a brief summary of the project (in 1 or 2 pages) or a copy of your business plan (if completed).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach identification. This includes: Birth Certificate, Aboriginal Ancestry Certificate of Indian Status, Metis Nation of Ontario Membership Card and Driver's Licence (photocopy all front and back).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide proof of cash equity in the form of bank statement. Date of statement (dd/mm/yy) _____ Amount available (\$) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If your business is located <u>on-reserve</u> , attach a First Nation business permit, if required and your Certificate of Possession. If you are <u>off-reserve</u> , provide applicable licenses (federal, provincial, or municipal).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Existing businesses attach the following forms; Business Registration with Canada Revenue Agency, Master Business License, and Workplace Safety and Insurance Board Registration (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will your project have any possible negative environmental impacts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach list of proposed security or collateral if you are applying for a commercial loan including description (make, model and VIN) and estimated value.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you related to a member of the Waubetek Board or staff? If yes, please specify the relationship.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever declared bankruptcy? If yes, please provide written details of the bankruptcy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach a partnership agreement and/or articles of incorporation of the business if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you received any previous financial assistance from Waubetek or the Government of Canada? If yes, please give description.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you or your business owe money to the Government of Canada? If yes, please specify.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide written cost quotations from the supplier for any costs greater than \$1,000. The quote must contain business address, phone number and price. For costs greater than \$10,000, we require 3 quotes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide copies of any business contracts or letters of intent from potential customers for your business.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach confirmation that the business has adequate commercial liability and business property insurance. If not, please attach quote for coverage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any reasons (legal, medical, etc.) why you may not be able to complete your project? If yes, please provide a written description of the issue(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach a quote or confirmation that the business has or will enter into an acceptable bookkeeping contract with an accountant/bookkeeper in order to provide annual financial statements to Waubetek. Accountant/Bookkeeper Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DECLARATION:

I (We) certify that all information given in this application is true and complete.

I (We) authorize and consent to having the Waubetek Business Development Corporation obtain from and share with persons or organizations, public or private, any information necessary to complete the assessment of the project outlined in this application.

I (We) authorize the right of access to Indigenous and Northern Affairs Canada, National Aboriginal Capital Corporations Association, FedNor, Ministry of Indigenous Relations and Reconciliation and the Ministry of Economic Development and Trade (SEDF) officials, as well as any other relevant agencies whose programs may be accessed, to review any of my client files maintained by the Waubetek Business Development Corporation.

I (We) authorize the Waubetek Business Development Corporation to audit the records of my business during the term of my agreement with Waubetek.

I (We) give consent and authorize the Waubetek Business Development Corporation to conduct reference checks and credit reports in order to verify any information provided on this application.

I (We) authorize the Waubetek Business Development Corporation to verify the information provided on this application as to my credit and employment history.

Name of Applicant (Print)

Signature of Applicant

Signed at _____ this _____ day of _____, 20____.

(location) (day) (month) (year)

*****APPLICANTS PLEASE NOTE*****

All applications are reviewed for viability, capacity of the applicant and compliance with our program criteria. No assumption of financing can be made until an applicant receives a formal Letter of Offer. Any and all costs incurred prior to funding approval are at an applicant's own risk and may not be included in any financing offered to the client. Any items submitted for financing may be adjusted or removed at Waubetek's discretion. Any financing provided is on the basis of properly substantiated claims by the applicant. Please note that cash payments for goods and services are not acceptable for claim reimbursement from Waubetek. Cash payments towards an Applicant's equity/share of the project costs may not be considered.

Please consult closely with our Business Development staff on these conditions.

Once this application is complete...mail or fax to Waubetek.

For further information or assistance with this application, please contact our office at:

Waubetek Business Development Corporation
P.O. Box 209, 6 Rainbow Valley Road
Birch Island, Ontario P0P 1A0
Phone: (705) 285-4275
Fax: (705) 285-4584
E-mail: info@waubetek.com

For office use only:

Date Application Received by Waubetek	Receiver's Initials	Business Location	BDO Initials
<p style="text-align: center;">_____/_____/_____ Month / Day / Year</p>			