



**WAUBETEK**  
BUSINESS DEVELOPMENT CORPORATION  
A Community Futures Development Corporation



*Investing in  
the Aboriginal  
Business Spirit*

## FINANCING APPLICATION For Marketing Projects only

*This marketing application is for Waubetek Marketing Contributions for projects up to \$15,000. Those businesses requiring more funds may need to provide more information, please talk to one of our Business Development Officers. Eligible Marketing Projects over \$15,000.00 will receive a lower percentage of a contribution.*

### HOW DID YOU HEAR ABOUT OUR PROGRAMS AND SERVICES?

- |   |  |
|---|--|
| <input type="checkbox"/> Economic Development Officer   | <input type="checkbox"/> Waubetek Facebook page                  |
| <input type="checkbox"/> Signs                          | <input type="checkbox"/> Information Sessions hosted by Waubetek |
| <input type="checkbox"/> Word of Mouth (friends/family) | <input type="checkbox"/> Waubetek Newsletter                     |
| <input type="checkbox"/> Waubetek Website               | <input type="checkbox"/> Waubetek Radio Ads                      |

Other (please specify): \_\_\_\_\_

### BUSINESS INFORMATION:

1) Applicant # 1 Ownership percentage: \_\_\_\_\_%      2) Applicant # 2 Ownership percentage: \_\_\_\_\_%

Business Operating Name: \_\_\_\_\_ Incorporation Number (if incorporated): \_\_\_\_\_

9 digit CRA Business Number \_\_\_\_\_ Ontario Business Name (BIN) Reg. No. \_\_\_\_\_  
w/ Expiry Date: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_ Business Telephone Number: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

### APPLICANT INFORMATION:

NOTE: If more than two applicants, please attach sheet with same information below plus Summary of Net Worth for each applicant.

**1) Primary Applicant:** Legal Name (as shown on Driver's License or primary ID used for business purposes): \_\_\_\_\_

Male    Female  
 Gender Neutral

First Nation Community: 10-digit Status card no. \_\_\_\_\_  Inuit Tapiriit Kanatami membership letter att'd

First Nation Unregistered (Non-Status)       Non-Indigenous

Social Insurance Number: \_\_\_\_\_ Date of Birth (dd/mm/yy): \_\_\_\_\_

Home Mailing address: \_\_\_\_\_

Residence Telephone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

**2) Second Applicant:** Legal Name (as shown on Driver's License or primary ID used for business purposes): \_\_\_\_\_

Male  Female  
 Gender Neutral

First Nation Community: 10-digit Status card no. \_\_\_\_\_  Inuit Tapiriit Kanatami membership letter att'd  
 First Nation Unregistered (Non-Status)  Metis  Non-Indigenous

Social Insurance Number: \_\_\_\_\_ Date of Birth (dd/mm/yy): \_\_\_\_\_

Home Mailing address: \_\_\_\_\_

Residence Telephone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

## APPLICANT/OWNER'S SUMMARY OF NET WORTH

(If there are more than two applicants, please attach sheet with same information below for each applicant)

ASSETS	\$	LIABILITIES	\$
Cash/Bank balance(s)	_____	Credit Card/Charge Account Balances	_____
Own Home (Y/N)	_____	Mortgages	_____
Equipment Vehicles	_____	Loans outstanding	_____
Other (specify)	_____	Vehicle loan outstanding	_____
	_____	Other (specify)	_____
Total Assets	(A) 0 _____	Total Liabilities	(B) 0 _____

Applicant/Owner's Summary of Net Worth: (A) - (B) = \$ 0 \_\_\_\_\_

## ESTIMATED MARKETING PROJECT FINANCING \$

<b>Marketing</b> <input type="checkbox"/> Signage <input type="checkbox"/> Media Advertising <input type="checkbox"/> Website <input type="checkbox"/> Promotional materials <b>Total</b>		\$ _____
		\$ _____
		\$ _____
		\$ _____
		\$ _____
<b>Total Marketing Project Costs</b>	<b>Total Marketing Project Financing</b>	\$ _____

### Financing:

a) Applicant Investment of 25% of total project costs \$ \_\_\_\_\_  
 (Please confirm your cash towards the project with your Business Development Officer)

b) Waubetek Conditional Contribution of 75% of total project costs \$ \_\_\_\_\_

**Total Marketing Budget \$ \_\_\_\_\_**

**Business Background** - (outline years in business, sales to date, human resources, other

**Product or Service** - describe your products or service.

**Executive Summary** – (The executive summary is a summary of your marketing project / plan (description of your ideas in promoting your product or service, and expected results).

**Marketing Objectives and Goals** – Objectives and goals are the particular accomplishments that will be achieved as a result of the marketing plan (i.e. - new market targeted). With this marketing project, what do you think will result in terms of new customers / clients (i.e. estimate increase or will you service a larger area?) Other accomplishments that will be achieved?

**Present Market** – This section of the marketing plan will describe exactly who the customers are for the product or services (who typically buys your product or service i.e. Elderly, youth, off-reserve, teachers, etc.). Who are your Target Markets (target markets are normally defined in the following terms; Demographic (age, income, education), Geographic (location), Lifestyles (activities, interests).

**Advantage of your product/service to your customers** – Why are your customers buying from you?

**How does that compare to your competition?** – Briefly detail who your competitors are and their marketing activities. How will your service or product be different from your competition?

**Marketing Strategy** – This section will describe in detail how the objectives and goals will be met. It is also important to include suspected reactions of the competition to the implemented strategies.

**Timeline for Marketing Project** – Describe by month when each proposed activity will be undertaken.

**Financial Information** – Provide recent financial statements for your business and outline the benefits of this marketing strategy on your revenue.

Revenue last year \$ \_\_\_\_\_ Expected revenue after marketing strategy \$ \_\_\_\_\_

**Required Attachments**

(All highlighted sections must be attached to the application before the application is considered complete; otherwise it may not be considered.	If Yes, please add attachment	NO	N/A
Attach resume (include legible photocopies of any certifications / licenses you have attained that pertain to this business). <b>Do NOT send originals</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach identification. This includes: Birth Certificate, Aboriginal Ancestry (Certificate of Indian Status, letter of confirmation through the Inuit Tapiriit Kanatami) <b>and</b> Driver's License (photocopy all front and back).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide proof of cash equity in the form of current bank statement. Date of statement (dd/mm/yy) _____ Amount available (\$) _____	<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"/>
Provide written cost quotations from the supplier for any costs greater than \$1,000. The quote must contain vendor's 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"/>
Copy of your Master Business License	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please note: If financing is approved, Social Insurance Number and a voided cheque or bank confirmation for a business bank account will be required. These requirements will be stated in any financing agreement.

## Declaration

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

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

I (We) understand that any false information given in this application and any accompanying materials may result in the rejection of this application or the immediate demand for the repayment of the loan in full with any interest accrued thereon.

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

\_\_\_\_\_  
Please Print Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Please Print Name of Applicant

\_\_\_\_\_  
Signature of Applicant

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
(location) (day) (month) (year)

**\*\*\* IMPORTANT NOTICE \*\*\***

Costs incurred prior to written approval for Financing by Waubetek will not be eligible. Also, cash payments for approved project purchases are also not eligible.

Once this application is complete...remit 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  
E-mail: waubetek@waubetek.com

**For office use only:**

Date Application Received by Waubetek	Receiver's Initials	Business Location	BDO Initials
<p>_____ Month / Day / Year</p>			