





Southeast Community Futures Development Corporation

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INDIGENOUS WOMEN'S ENTREPRENUER LOAN APPLICATION

APPLICANT INFORMATION:

Name:	First Nation Membership:
Address:	Phone:
E-Mail:	Date of Birth:
S.I.N.:	Gender:
Current Employer (if applicable):	
<u>CO-APPLICANT – or- GUARANTOR</u>	
Name:	First Nation Membership:
Address:	Phone:
E-Mail:	Date of Birth:
S.I.N.:	Gender:
Current Employer (if applicable):	

BUSINESS IDENTIFICATION:

Name of Business:		
Address:		Business Phone:
Business Fax:		Website:
Proprietorship:	Partnership:	Incorporated:
Registered:	red: Date of Registration:	
Proposed Location:	oposed Location:Number of Employees: Full Time:Part Time:	
This Application is to:		
Start a Business: Purchase a Business:		
Date the business began op	perations or will comme	nce:
Amount of Loan Requeste	d:	
Principals (owners) and percentage of ownership:		
A. Name:		% of ownership:
B. Name:		% of ownership:
<u>COMMUNITY SUPPORT:</u>		

BCR: _____ Other: _____

FINANCIAL REQUIREMENTS:

ESTIMATED PROJECT COSTS

PROJECT FINANCING

Land:	 Applicant Equity:	
Buildings:	 Other Equity:	
Equipment:	 IWE Loan:	
Start-up Costs:	 Other Loans:	
Other:	 Other:	
TOTAL COSTS:	 TOTAL FINANCINO	j:

STATEMENT OF PERSONAL NET WORTH:

ASSETS

LIABILITIES

Cash:	Bank Loans:	
Real Estate:	Mortgages:	
Automobile(s):	Credit Cards:	
Household Effects:	Charge Accounts:	
Other:	Other:	
TOTAL ASSETS:	TOTAL LIABILITIES:	
NET WORTH = TOTAL ASSETS – TOTAL LIABILITIES =		
What is your proposed security/collateral for the loan? Value (\$)		

CLIENT INFORMATION:

DESCRIPTION (Include serial #)	YEAR <u>PURCHASED</u>	PURCHASE <u>PRICE</u>	PRESENT VALUE	SECURED WITH <u>ANOTHER LOAN</u> ?
BUSINESS DESCRIPTION:				
My business concept is:				
My rationale for this business is:				
I need the following to start up this	business:			
Land:				
Buildings:				
Equipment:				
Inventory:				

OWNERSHIP AND MANAGEMENT:

Who are the owners of the business:	
What experience does the management have:	
OPERATIONS:	
What will be the hours of operation of the business:	
Who will be responsible for what duties:	
MARKETING:	
The market for this business will be:	
The location of the business will be:	
My competitors are:	
Besides my competitors, what could hurt or help this business:	

REVENUE AND EXPENSES (Annually):

Expected Sales:	(A)
Cost of Sales:	(B)
Gross Profit (A - B):	(C)
Expenses:	
Wages & Benefits (Owner):	-
Wages & Benefits (Staff):	-
Office Expenses:	-
Insurance:	-
Legal / Accounting:	-
Rent / Lease:	-
Vehicle:	-
Miscellaneous:	-
Other:	
	_
	-
	-
Total Expenses:	(D)
Net Profit (C – D)	

APPLICANT DECLARATION:

I / We clarify that to the best of my knowledge, the information given on this application is true and correct. The Southeast Community Futures Development Corporation is hereby authorized to check the accuracy of the information and obtain credit reports on me.

I hereby authorize duly appointed representatives of SCFDC to obtain information from, and share with, persons or organizations, public or private, any information necessary, including credit information about me from Employers, First Nations, Credit Bureaus, or any persons connected to my dealings, to complete the assessment of my Application and the proposed project.

Date:	Signature:
Date:	Signature: