

APPLICATION FOR FINANCING

The following information is required prior to the consideration of any loan application.

SETTING UP A NEW BUSINESS

- 1. Business Plan**
- 2. Detailed cash flow by month - forecasted revenue and expenses for two years;**
- 3. Current resume or summary of applicant's background;**
- 4. Completed and signed Application for Financing;**
- 5. Copies of any significant contracts or Letters of Intent.**

PURCHASING AN EXISTING BUSINESS **OR** **FINANCING FOR A EXISTING BUSINESS**

All of the above (items 1 through 5) plus the following:

- 1. Current accounts receivable and payable;**
- 2. List of assets (at current value) and inventory (at cost);**
- 3. Copy of any existing or pending leases;**
- 4. 2-3 years of financial statements.**

PLEASE NOTE THE FOLLOWING

- 1. We are generally more flexible than the bank, but charge a higher interest rate.**
- 2. There will be an administrative and/or legal fee for any approved loans**
- 3. Interest rates and fees depend on the risk and details of the loan.**

If you wish to discuss a loan, please make an appointment with our Business Investment Counsellor.

4717 Marine Avenue, 2nd floor
Powell River, BC V8A 2L2
Phone: 604-485-7901 Fax: 604-485-4897
Email: derek@prfutures.ca Web www.prfutures.ca

BUSINESS/APPLICANT NAME

DATE

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE	Social Insurance #	Date of Birth MM/DD/YY / /
Home Address (Apt/PO Box/Street & Number)			City/Town	Prov Postal Code
Home Telephone	Business Telephone	Cell Phone	Fax	
Email and Webpage address				
Principal Bank or Financial Institution		Address		Number of dependents including spouse
Have you ever borrowed before?	If yes where	When	Amount	

FINANCIAL PROFILE

ASSETS List and describe all assets		LIABILITIES List credit cards and other liabilities including alimony and child support	
CASH	\$	BANK LOANS	Balance owing \$
		Mortgages on real estate	
		Credit cards Please itemize	1
			2
			3
Retirement accounts			
Marketable securities			
Accounts & Loans Receivable (Please itemize)	1	Other obligations	1
	2		2
	3		
(A) Total Assets		(B) Total Liabilities	
Automobiles	Make/year	(C) Net Worth (A minus B)	
	Make/year		
Real Estate		Other Obligations Are you personally supporting other obligations not listed above (e.g. Co-signer/endorser/guarantor)? If yes please provide details on amount, to whom and nature of obligations below: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Business Interests			
Other assets Please itemize	1		
	2		
	3		

PRESENT ANNUAL INCOME & EXPENSES

Your gross income Annual salary or wages	\$	Your expenses Mortgage/rental payments	\$
Commissions and bonuses		Real estate taxes	
Rental income		Federal & Provincial income taxes	
Other income (please itemize)	1	Credit cards	
	2		
Subtotal		Alimony, child support or maintenance payments	
Spouse's gross income Annual salary or wages		Other expenses (please itemize)	1
			2
Other income (Please Itemize)	1		3
	2		
Total Annual Income		Total Annual Expenses	
	\$		\$

EMPLOYMENT INFORMATION

Employer's Name & Address (present)		Years There	Telephone
Occupation	Previous Employer Name & Address		Telephone

SPOUSAL INFORMATION

First Name	Initial	Surname	Occupation	Social Insurance Number	Date of Birth
Employer's Name & Address				Years there	Telephone

BUSINESS REFERENCES

(Please identify your Accountant, Lawyer and Insurance Agent etc, where applicable)

Bank or Financial Institute	Name & Address	Telephone	Contact
Lawyer/Notary			
Auditor/Accountant			
Insurance Broker/Agent			

OTHER CREDIT RELATIONSHIPS

(Please provide details of your existing or previous business credit relationships below)

Name of Lender & Address

MISCELLANEOUS OBLIGATIONS

Is the business/or you an endorser, guarantor or co-signor or have obligations?	Yes <input type="checkbox"/>	Does the business owe any back taxes? (i.e. sales, income, realty or municipal business tax)?	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>
Is the business/or you a party to any claim or lawsuit?	Yes <input type="checkbox"/>	Has the business/or you ever been in receivership or declared bankruptcy?	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>

If you answered "Yes" to any of the above, please provide details

INSURANCE COVERAGE

(Please indicate existing or planned coverage including type and amount)

Type: Fire/home/building/stock and equipment/business interruption/key executive/other	Amount	Existing/Planned	Insurance Company

ASSETS & PROPOSED COLLATERAL

(Please indicate security available & estimated market value)

Description: Fixed Assets/Accounts Receivable/Securities/ Inventory/Other	Title in Name of	Value	Existing encumbrances (if applicable)

BUSINESS PROFILE

Business Name (and trade name if applicable)	Telephone		
Address	City/Town	Prov	Postal Code

Date established	How long under present management (years)	# of employees	Previous company name (if applicable)	
Business facilities at other locations	Street address		City/town	Prov
	Street address		City/town	Prov

LOAN REQUIREMENT(S)

Amount	Purpose of Loan

Proposed equity contribution	Purpose	
Is business or cash flow seasonal? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is/are loan(s) to be life insured? Yes <input type="checkbox"/> No <input type="checkbox"/>	Explain

When are revenue periods High?	Loan repayment
Low?	

OWNERSHIP/SHAREHOLDERS MANAGEMENT

Proprietorship
 Partnership
 Corporation
 Federal Charter
 Provincial Charter

Name	% of Ownership	Title/Position	Date of Birth	Tenure (yrs)

EXPERIENCE/BACKGROUND (Describe)

	Telephone
	Telephone
	Telephone



DECLARATION

PLEASE READ THE FOLLOWING CONDITIONS CAREFULLY BEFORE SIGNING

The statements made herein are for the express purpose of obtaining financing from the Community Futures Development Corporation of the Powell River Region (herein referred to as the *CORPORATION*) and are to the best of my/our knowledge and belief, true and correct.

I/we understand that additional information, if required in support of this Application, must be supplied to the Corporation before consideration can be given to this Application.

I/we consent to the *CORPORATION* making any inquiries of such persons, firms or other corporations as it deems necessary in order to reach a decision regarding this Application.

I/we hereby agree that any expenses incurred (including legal and documentation costs) will be borne by me/us as part of the costs to obtain the funds applied for in this Application.

I/we also agree to allow Her Majesty the Queen in right of Canada, as represented by the Minister of Western Economic Diversification (herein referred to as *CANADA*) access to my/our client files for purposes of reporting, monitoring and evaluating, and to provide information to *CANADA* about the assistance provided to me/us by the *CORPORATION*.

I/we understand that any information provided to the *CORPORATION* will remain confidential. However, I/we further understand that for the purposes of adjudication, it may be necessary to circulate certain information to the Members of Community Futures Investment Committee of the *CORPORATION*.

SIGNED: (CORPORATE SEAL IF APPLICABLE)

Signature

Printed Name

Witness

Signature

Printed Name

Witness

PERSONAL BUDGET of

INCOME

1.	Main	_____
2.	Supplementary	_____
3.	Additional	_____
4.	GST	_____
5.	Child Benefits	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
<u>TOTAL</u>		\$ _____

EXPENSES

A. Fixed

1.	Mortgage Payments or Rent	_____
2.	Insurance: Vehicle	_____
	House	_____
3.	Medical	_____
4.	Property Taxes	_____
5.	Water & Garbage	_____
6.	Vehicle Payments	_____
7.	_____	_____

B. Variable

1.	Food	_____
2.	Vehicle Maintenance	_____
	Vehicle Operation (eg: gas/oil) ..	_____
3.	Daycare	_____
4.	Telephone	_____
5.	Utilities	_____
6.	Education	_____
7.	Entertainment	_____
8.	Cable	_____
9.	_____	_____
<u>TOTAL</u>		\$ _____



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