



FIRST PEOPLES
economic growth fund

Project # <small>FPEGF Office Use Only</small>
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BUSINESS CONTRIBUTION FUND application

R. March 2019

ALL SECTIONS, APPLICABLE TO THE APPLICANT, MUST BE COMPLETED **IN FULL**, BEFORE THIS APPLICATION WILL BE CONSIDERED BY FIRST PEOPLES ECONOMIC GROWTH FUND.

Section A: APPLICANT INFORMATION (Each partner/shareholder must complete a separate application in full)

Applicant Legal Name: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

Current Address: _____

City/Community: _____ Province: _____ Postal Code: _____

If Applicant is an **organization/business**, please complete the following:

Name of Main Contact Person: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

If Applicant is an **individual**, please complete the following:

Date of Birth: _____ SIN #: _____
Month Day Year

Status #: _____ (Please provide a copy of your Status card with this application.)

Member of (First Nation Name): _____

Driver's License #: _____ Marital Status: _____ # of Dependents: _____

Management's Education and/or Experience:

Please attach a statement of management's education, training, employment history and management experience (Résumé). **Summarize below how the education and/or experience relates to this proposal.**

Section B: BUSINESS INFORMATION (Each partner/shareholder must complete a separate application in full)

Business Structure: Individual/Sole Proprietorship Corporation Co-op

Partnership Joint Venture

Incorporated Company, Band-Owned or Aboriginal Community-Owned

Other: _____

New – Proposed Business Start Date: _____

Existing – Are previous financial statements available and attached? _____

Acquisition

Business Name: _____

Is the project located in a First Nation community? If yes, please provide the name. Yes No

Business Mailing Address: _____

Location of Existing or Proposed Business (if different from above): _____

Phone: _____ Fax: _____ Email: _____

Number of jobs being created (including owner's): Full-Time: _____ Part-Time: _____

Number of jobs being maintained (including owner's): Full-Time: _____ Part-Time: _____

Business Ownership (Each partner/shareholder must complete a separate application in full):

Please note that businesses and organizations must be majority Aboriginal-owned and controlled.

Name(s) of Owner(s) / Shareholder(s)	Name of First Nation	% of Ownership

What product or service will you be providing, or are you currently providing? Identify your current and/or target market and any existing competitors. Attach any additional information that helps support your proposal, such as business studies, market studies and relevant industry information.

Section C: FINANCIAL INFORMATION

Itemize major projected expenditures and the proposed financing package. Total Project Costs must equal Total Project Financing. These are estimates only and are to provide FPEGF with information on the expected size and scope of your project.

Estimated Project Costs:

Business Planning	\$ _____
Capital	
<i>Land</i>	\$ _____
<i>Buildings</i>	\$ _____
<i>Equipment</i>	\$ _____
<i>Inventory</i>	\$ _____
<i>Other (specify) _____</i>	\$ _____
Operating	
<i>Insurance</i>	\$ _____
<i>Utilities</i>	\$ _____
<i>Other (specify) _____</i>	\$ _____
Marketing	\$ _____
Business Support	\$ _____
Other (specify) _____	\$ _____
Total Estimated Project Costs	\$ _____

Estimated Project Financing:

Minimum Applicant Cash Equity* (% of Project Costs)	
<i>Business Planning (25% of costs)</i>	\$ _____
<i>Capital (10% of costs)</i>	\$ _____
<i>Operating (10% of costs)</i>	\$ _____
<i>Marketing (25% of costs)</i>	\$ _____
<i>Business Support (25% of costs)</i>	\$ _____
FPEGF Business Contribution Fund	\$ _____
FPEGF Loan	\$ _____
Government Assistance	\$ _____
Commercial Financing	\$ _____
Other (specify) _____	\$ _____
Other (specify) _____	\$ _____
Total Estimated Project Financing	\$ _____

*Note: FPEGF requires proof of cash equity prior to proceeding with your application (e.g. copy of your bank statement).

Sources of Commercial Financing:

Identify the contact person and telephone number of the financial institutions, government organizations or others you have approached to finance this project.

Contact Person	Telephone Number	Organization

Summary of Net Worth:

Cash/Bank Balance (confirmation required)	\$ _____	Charge Accounts (Credit Cards)	\$ _____
Real Estate	\$ _____	Mortgages	\$ _____
Vehicles	\$ _____	Loans – Vehicle	\$ _____
Equipment	\$ _____	Loans – Equipment	\$ _____
Inventory	\$ _____	Loans – Personal	\$ _____
Other (specify) _____	\$ _____	Accounts Payable	\$ _____
Other (specify) _____	\$ _____	Other (specify) _____	\$ _____
Total Assets (A)	\$ _____	Total Liabilities (B)	\$ _____

Net Worth: A – B = \$ _____

Section D: OTHER INFORMATION

Have you, or any business that you own or have previously owned, received financial assistance from the Government of Canada? If yes, please describe.

 Yes No

Are you applying to any other government programs for financial assistance for this project? If yes, please describe.

 Yes No

Do you or your business owe money to the Government of Canada? If yes, please indicated to which department or agency and list amount(s).

 Yes No

Have you already made any financial commitments for the project? If yes, please list amount(s). *Note: Any costs for which you have made a legal commitment prior to project approval will not be eligible for support.*

 Yes No

Note: To be eligible for support, the Applicant should be involved full-time with the proposed business in a management capacity.

To help us with our information and marketing efforts, please tell us where you learned about First Peoples Economic Growth Fund's Business Contribution Fund (check all that apply).

- FPEGF Website
- Other Website (specify) _____
- Advertising (specify, i.e. radio, newspaper) _____
- Aboriginal Affairs & Northern Development Canada Office
- Canada/Manitoba Business Service Centre
- Aboriginal Business or Financial Organization
- Economic Development Officer
- Business Contact
- Past/Current Client of FPEGF
- Friend or Family Member
- Conference/Workshop/Tradeshow (specify) _____
- Other (specify) _____

Section E: CREDIT INFORMATION & DISCLAIMER

The Applicant hereby authorizes First Peoples Economic Growth Fund Inc. to conduct any credit checks, inquiries, and property searches from other agencies and sources it deems appropriate to reach a decision on this application or necessary to administer the financial assistance under this Program and consents to the disclosure at any time of any credit information about the Applicant to any credit reporting agency or to anyone with whom I/we have financial relations.

Declaration:

The statements herein and the attachments hereto reflect an accurate description and estimate of costs regarding the intended project.

The Applicant hereby declares that none of the principals or guarantors are undischarged bankrupts or have any bankruptcy proceedings in existence with respect to themselves or companies which they operate. The Applicant hereby further declares that he/she is not associated (that is an officer or child of an officer or director) with First Peoples Economic Growth Fund Inc.

The Applicant consents to FPEGF to share the Applicant's name, phone number(s) and email address(es) with third party service providers (who are required to safeguard the handling of this information under the *Personal Information Protection and Electronic Documents Act (PIPEDA)* and/or the *Privacy Act*) for statistical, research and evaluation purposes.

Right to Publicize:

The Applicant hereby grants First Peoples Economic Growth Fund Inc. the right to make public announcements related to the financing approved, to erect signs or other notices on the site of projects involving construction or expansion of an existing enterprise, and in general, may publicize or advertise any details related to the financing approved.

By signing below, the Applicant declares that he/she is of Manitoba First Nation heritage and/or represents a company that is majority First Nation-owned.

Applicant Signature/Authorized Signatory	Print Name	Date
Witness Signature	Print Name	Date

Have you:

- completed all sections of this application form **IN FULL**, which are applicable to the Applicant?
- attached a copy of your **Status card** to this application, if applicable?
- attached a **résumé** that highlights experience, training and or education related to your business activity?
- attached a copy of any partnership agreements or incorporation documents?
- attached any additional information that supports your proposal/business plan, such as business studies, market studies or relevant industry information?
- attached proof of at least **10% cash equity** of the estimated total project costs that will be confirmed in detail in your business plan (e.g. copy of your bank statement)?

If an existing business, have you:

- attached copies of your most recent financial statements (up to three years, if available)?

Note: Failure to provide these documents with your Business Contribution Fund Application will cause delays in assessing your project.