



Nipissing First Nation
SMALL BUSINESS LOAN APPLICATION

APPLICANT INFORMATION

Name:			
Date of Birth:		Phone:	
SIN:		Status #:	
Current address:			
City:	Province:		Postal Code:
Own	Rent	Monthly payment or rent:	How long?

EMPLOYMENT INFORMATION

Current employer:			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:	Province:		Postal Code:
Position:	Hourly	Salary	Annual income:
Name of a relative not residing with you:			
Address:			Phone:
City:	Province:		Postal Code:
Relationship:			

CO-APPLICANT INFORMATION, IF FOR A JOINT ACCOUNT

Name:			
Date of Birth:		Phone:	
SIN:		Status #:	
Current address:			
City:	Province:		Postal Code:
Own	Rent	Monthly payment or rent:	How long?
EMPLOYMENT INFORMATION			
Current employer:			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:	Province:		Postal Code:
Position:	Hourly	Salary	Annual income:
Name of a relative not residing with you:			
Address:			Phone:
City:	Province:		Postal Code:
Relationship:			

MORTGAGE COMPANY

Account no.:	Address:		
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CREDIT CARDS

Name	Account no.	Current balance	Monthly payment



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AUTO LOANS

Auto loans	Account no.	Balance	Monthly payment

OTHER LOANS, DEBTS, OR OBLIGATIONS

Description	Account no.	Amount

OTHER ASSETS OR SOURCES OF INCOME

Description	Amount per month or value

I authorize Nipissing First Nation to verify the information provided on this form as to my credit and employment history.

Signature of applicant	Date
Signature of co-applicant, if for joint account	Date



Nipissing First Nation
SMALL BUSINESS PROPOSAL

MARKET ANALYSIS

Who are your competitors?

Name	Location	Description

Who are your Customers?

Name	Location	Description

Who are your main Suppliers?

Name	Location	Description

Why will your customers purchase products or services from you over your competitors?

How do you plan to advertise your business?



Nipissing First Nation
SMALL BUSINESS PROPOSAL

INCOME / EXPENSE STATEMENT FORCAST

Revenues	Projected Year 1	Projected Year 2	Projected Year 3
Sales			
Equity			
Grants			
Loans			
Other			
Total Revenue			
Expenses	Projected Year 1	Projected Year 2	Projected Year3
Cost / Sales			
Rent			
Equipment			
Loan Payments			
Utilities			
Drawings			
Wages			
Bookkeeping			
Advertising			
Business Support			
Supplies			
Telephone			
Insurance			
Licenses			
Fee / Dues			
Total Expenses			
Net Profit / Loss			