

Nipissing First Nation SMALL BUSINESS LOAN APPLICATION

APPLICANT INFORMATION						
Name:						
Date of Birth:			Phone:			
SIN:			Status 7	#:		
Current address:						
City:		Province:			Postal Code	:
Own Rent		Monthly payme	nt or rent	t:	How long?	
		EMPLOYMENT	INFORMA	TION		
Current employer:						
Employer address:	Employer address:			How long?		
Phone:	E-mail:	1			Fax:	
City:		Province:			Postal Code:	
Position:		Hourly	Salary		Annual inco	me:
Name of a relative not residir	ig with you	1:				
Address:		1			Phone:	
City:		Province:			Postal Code:	
Relationship:						
C	O-APPLICA	NT INFORMATIO	N, IF FOR	R A JOINT AG	CCOUNT	
Name:						
Date of Birth:			Phone:			
SIN:			Status 7	#:		
Current address:		1				
City:		Province:	Postal Code:		:	
Own Rent		Monthly payme				
EMPLOYMENT INFORMATION						
Current employer:					1	
Employer address:	1				How long?	
Phone:	E-mail:	1			Fax:	
City:		Province:		Postal Code:		
Position:		Hourly	Salary		Annual income:	
Name of a relative not residir	ig with you	1:			1	
Address:		Phone:		Phone:		
City: Province:			Postal Code:			
Relationship:						
MORTGAGE COMPANY						
Account no.: Address:						
CREDIT CARDS						
Name Account no.			Current balance		Monthly payment	

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FIRST NATION

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AUTO LOANS				
Auto loans	Account no.	Balance	Monthly payment	
OTH	IER LOANS, DEBTS, OR OI	BLIGATIONS	1	
Description Account no. Amount				
OTHER ASSETS OR SOURCES OF INCOME				
Description Amount per month or val			lue	
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

APPLICANT INFORMATION					
Business Name:					
Business Address:					
City:		Province:			Postal Code:
Business Ownership: S	ole Proprie	tor	Partnership	C	Corporation
	NAMES	OF SIGNING	GOFFICERS / SHAR	EHOLDI	ERS
		CLASSIFIC	ATION OF BUSINES	S	
Retail:		Food:			Manufacturing:
Food:		Tourism:			Construction:
Forestry:		Wholesale:	:		Service:
Other (please specify):					
			SS DESCRIPTION	-	
Hours of Operation:		Time Emplo			part time Employees:
Describe in detail the product	s and/or S	ervices your	business will provi	de:	



Nipissing First Nation SMALL BUSINESS PROPOSAL

MARKET ANALYSIS

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Who are your competitors?								
Name	Location	Description						
Who are your Customers?								
Name	Location	Description						
Who are your main Suppliers?	I							
Name	Location	Description						
Name	LOCALION	Description						
Why will your customers purcha	se products or services from	n you over your competitors?						
How do you plan to advertise yo	our business?							



Nipissing First Nation SMALL BUSINESS PROPOSAL

STARTUP COSTS					
Item to be Purchased	Supplier		Cost		
	TOTAL Startup Cost				
FUNDING BREAKDOWN					
Source	Туре	Amount			
Client Equity	Cash				
NFN Small Business Loan	Loan				
	Loan				
	Grant				
	Grant				
	TOTAL				



Supplies Telephone Insurance Licenses Fee / Dues

Total Expenses

Net Profit / Loss

Nipissing First Nation SMALL BUSINESS PROPOSAL

INCOME / EXPENSE STATEMENT FORCAST

	LINGE STATEMENT I	UNCASI	
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			