



Clarence Campeau Development Fund



Application: **Business Plan** _____ **Management & Marketing** _____
Aftercare _____

Name of Applicant:		
Trade Name of Business:		
Your Business is: <ul style="list-style-type: none"> <input type="radio"/> A Proprietorship <input type="radio"/> A Partnership <input type="radio"/> An Incorporated Company <p>If incorporated or partnership, attach Articles of Incorporation or Partnership Agreement</p>	Application Purpose: <ul style="list-style-type: none"> <input type="radio"/> Start New Business <input type="radio"/> Acquire an Existing Business <input type="radio"/> Expand an Existing Business <p>If acquisition of an existing business or expansion of an existing business – please provide businesses financial statements for the last 3 years.</p>	
Business Phone:	Website:	
Cell Phone:	E-Mail:	
Fax:		
What is your business type:		
Business Owners:	Positions Held:	% Owned:
Mailing Address:		
City/Town :	Postal Code :	

Amount being applied for :

\$

Describe your project:

(If more room is required please attach a separate sheet)

Please indicate what your project costs will be and the amount of financing required below.

Project Costs:

Financing:

	\$		CCDF ***	\$
			Client Equity	
Total	\$		Total	\$

*Note: Business Plan – CCDF can contribute 75% of the costs to a maximum of \$10,000.

**Note: Management & Marketing – CCDF can contribute up to 75% of approved costs.

*** Note: Aftercare - CCDF can contribute 100% of approved costs to a maximum of \$10,000 over the life of your CCDF contribution.

Credit Information:

The Applicant hereby grants the Clarence Campeau Development Fund the authority to conduct credit checks, inquiries and searches necessary to reach a decision on this application or as deemed necessary to administer the loan. The applicant consents to the disclosure of any credit information to any credit reporting agency or to anyone whom I/we have financial relations.

Declaration:

The statements and information herein and those attached which form part of this application are for the purpose of obtaining financial assistance from the Clarence Campeau Development Fund and are to the best of my/our knowledge and belief, true and correct.

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.

Date _____

Signature of Applicant(s)

Witness

Authorized Signature on behalf of the Company
(Seal)

Witness

Should you have any questions or concerns regarding this application please do not hesitate to contact our office in Saskatoon or Regina.

Clarence Campeau Development Fund

www.clarencecampeau.com

Saskatoon:

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Regina

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