

## **Funding Application**

Clarence Campeau Development Fund SaskMétis Economic Development Corporation



Find us online at: www.clarencecampeau.com www.smedco.ca

Welcome! Please fill out all applicable sections. Answer all questions as completely as possible and provide attachments if space is insufficient. Should you require additional information or assistance in completing your application, please contact us directly at 306-657-4870, or Toll-Free at 1-888-657-4870.

Once completed, please mail or email to one of our two locations:

## Saskatoon Regina

2158 Airport Drive, Saskatoon, SK, S7L 6M6 Fax: 306-657-4890

Email: info@clarencecampeau.com

2380-2nd Avenue, Regina, SK, S4R 1A6

Fax: 306-657-4890

Email: info@clarencecampeau.com

| Trade Name of Business:    |                        |                      |                        |            |  |  |
|----------------------------|------------------------|----------------------|------------------------|------------|--|--|
| Business Structure         | Application Purpose    |                      | <b>Business Owners</b> | % Owned    |  |  |
| ☐ Sole Proprietorship      | ☐ Start a New Business | Start a New Business |                        |            |  |  |
| Partnership                | ☐ Acquire a Business   | ☐ Acquire a Business |                        |            |  |  |
| Corporation                | ☐ Expand a Business    | Expand a Business    |                        |            |  |  |
|                            |                        |                      |                        |            |  |  |
| City/Town: Business Phone: |                        | How lon              |                        | ars/Months |  |  |
|                            |                        | How lon              | g at Address:          | ars/Months |  |  |
| Business Phone:            |                        | How lon<br>Email:    | g at Address:          | ars/Months |  |  |

| <b>Describe your bu</b> If more room is requi    | siness and fun<br>red, please attach  | nding needs:<br>a separate shee  | t.                 |               |            |          |
|--|---------------------------------------|----------------------------------|--------------------|---------------|------------|----------|
|  |                                       |                                  |                    |               |            |          |
|  |                                       |                                  |                    |               |            |          |
| Location of the pr                               | oject and the                         | primary marl                     | ket your bus       | iness will be | e serving: |          |
|  |                                       |                                  |                    |               |            |          |
|  |                                       |                                  |                    |               |            |          |
|  |                                       |                                  |                    |               |            |          |
| <b>Identify your com</b><br>Provide the names of | <b>npetition</b><br>other similar bus | inesses operatin                 | g in the area      |               |            |          |
|  |                                       |                                  |                    |               |            |          |
|  |                                       |                                  |                    |               |            |          |
|  |                                       |                                  |                    |               |            |          |
| <b>Existing Busines</b>                          | s Debt (if appli                      | cable)                           |                    |               |            |          |
| Lending Institution                              | Original Loan<br>Amount               | Current<br>Outstanding<br>Amount | Monthly<br>Payment | Interest Rate | Terms      | Security |
|  | \$                                    | \$                               | \$                 | %             |            |          |
|  | \$                                    | \$                               | \$                 | %             |            |          |
|  | <b>c</b>                              |                                  | <b>c</b>           | %             |            |          |

## Estimated Project Costs

## **Estimated Financing**

\$

| Capital                                | Cash Equity From Applicant  |  |  |
|--|---|--|--|
| Land                                   | Equity is dependent on program.   |  |  |
| Buildings                              | Women's Business Development Program (2%)  Business Development Program (5%)  Métis Entrepreneur Equity Program (10%) |  |  |
| Equipment                              | CCDF Contributions  |  |  |
| Leasehold Improvements/<br>Renovations | Non-Repayable Grant   |  |  |
| Vehicles                               | Métis Entrepreneur Equity Program  (up to 40% of eligible cost to a maximum of \$99,999)                              |  |  |
| Other (specify)                        | Community Business Development Program  |  |  |
| Operating                              | Repayable Loan at 0%  |  |  |
| Insurance (first 3 months)             |   |  |  |
| Rent (first 3 months)                  | SMEDCO Term Financing   |  |  |
| Utilities (first 3 months)             | Repayable Loan  |  |  |
| Inventory (1 month)                    | Interest rate and secured   |  |  |
| Total Capital & Operating              | Commercial Financing  |  |  |
| Marketing (Maximum \$8,000)            | Term Financing  Bank, Credit Union or other Commercial  |  |  |
| Website                                | Lender  |  |  |
| Logo Development                       |   |  |  |
| Business Cards                         | Line of Credit  |  |  |
| Total Marketing                        |   |  |  |
| Total Estimated Project Costs          | Total Estimating Financing  |  |  |
| * Provide <b>q</b>                     | uotes for all project cost requests *   |  |  |

| Personal Financial Institution:  Contact:   |   |
|---|---|
| Address:  |   |
| Phone: Email:   |   |
|   |   |
| Administration Fee  |   |
| Business Development Programs: The client will be responsible for a contributions, as applicable.   | 1% administration fee of the approved loan (repayable)  |
| SaskMétis Economic Development Corporation contributions: The cloan (repayable) contributions.  | lient will be responsible for a 1% administration fee of the approved   |
| Credit Information  |   |
| The applicant hereby grants the Clarence Campeau Development Fu authority to conduct credit checks, inquiries and searches necessary to administer the loan. The applicant consents to the disclosure of an whom I/we have financial relations.                                       | y to reach a decision on this application or as deemed necessary  |
| Declaration   |   |
| The statements and information herein and those attached which for assistance from the Clarence Campeau Development Fund and Sask my/our knowledge and belief, true and correct.  |   |
| The applicant hereby declares that none of the principals or guarant proceedings in existence with respect to themselves or companies w   |   |
| I consent to the Métis Entrepreneur Equity Program (MEEP) and Mét<br>with third party service providers and/or provincial/federal governm<br>information under the Personal Information Protection and Electron<br>research and evaluation purposes for the Métis Entrepreneur Equity | nent agencies (who are required to safeguard the handling of this ic Documents Act (PIPEDA) and/or the Privacy Act for statistical, |
| Date:   |   |
| <u> </u>  |   |
| Signature of Applicant  | Witness   |
| Signature of Applicant  | Witness   |