

Business Plan Check List

Applicant's Name: _____

What dates did you attend the business plan workshop series? _____

Which Employment Assistance Service referred you to Community Futures? _____

Are you applying for a loan from Community Futures? ? Yes ? No

Did you include the Loan Application Form? ? Yes ? No ? N/A

			
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This section: to be completed by Community Futures staff

	SE Orientation & BP Workshop Registration Form		To Service Canada Office: Only clients on current claims
	On EI – Signed Section 25 (2 copies)		Copy of Participants Information Form
	Seen Service Provider (EI/Exhaustee)		Resume
	Return To Work Action Plan (EI/Exhaustee)		Return to Work Action Plan
	Completed EI Verification		Signed Section 25
			Memo from Community Futures
	Reviewed by:		Date:

The following sample Letters of Intent are for your customers to complete indicating their interest to purchase from you. Choose the format appropriate to your business (service or product based) and *customize* it by re-typing it with your business name, contact information, description of product or service, & information on the prices you will charge for your product or service. Summarize the letters received in the Market Support Summary section of your business plan, include copies of all letters of intent in the appendices and transfer the information from letters of intent to your executive summary. Microsoft Word templates for "Letters of Intent" can be obtained at www.futures.bc.ca under the Self-Employment Program tab then the Download Forms tab.

SAMPLE LETTER-OF-INTENT / PRODUCT BASED BUSINESS

Date

To: (Your Business Name)

With respect to your proposal for me to purchase from your product line, I would like to offer my support to the project by way of this letter-of-intent. I offer the following as being a reasonable estimate of how much I would possibly spend and when the purchase would likely occur.

I plan to purchase approximately:

January	\$	February	\$
March	\$	April	\$
May	\$	June	\$
July	\$	August	\$
September	\$	October	\$
November	\$	December	\$

I understand that this letter-of-intent does not constitute a contractual agreement to purchase products from you, but rather offers my support to the venture and indicates my genuine interest in considering your business as a potential source of supply for (myself/my family/my store, etc.).

Yours truly,

Name:

Business name: (if applicable)

Phone Number:

SAMPLE LETTER-OF-INTENT / SERVICE BASED BUSINESS

Date

To: (Your Business Name)

With respect to your proposal for me to purchase your services, I would like to offer my support to the project by way of this letter-of-intent. I offer the following as being a reasonable estimate of how much I would possibly spend and when the purchase would likely occur.

I plan to purchase approximately:

January	\$	February	\$
March	\$	April	\$
May	\$	June	\$
July	\$	August	\$
September	\$	October	\$
November	\$	December	\$

I understand that this letter-of-intent does not constitute a contractual agreement to purchase products from you, but rather offers my support to the venture and indicates my genuine interest in considering your business when the need arises.

Yours truly,

Name:

Business name: (if applicable)

Phone Number:

The following Market Research letter is what you will present to your Central Kootenay competition for their signature and feedback. *Customize* this form by re-typing it with your business idea & where you propose to sell your products. Speak to your competition with a genuine interest about their perception of room in the current marketplace. Summarize the information gathered in the Competitive Analysis section of your business plan, include copies of all Market Research letters in the appendices and transfer the information to your Executive Summary. Microsoft Word templates for "Market Research" forms can be obtained at www.futures.bc.ca under the Self-Employment Program tab then the Download Forms tab.

MARKET RESEARCH

I am currently doing market research for my business plan and I would appreciate your assistance.

The business I propose to start is _____

I plan to sell my products/services in the _____ area.

In order to have my business plan completed in a timely manner, I would appreciate receiving your response by: _____

Thank you for your time and assistance. I really appreciate your help and I look forward to working with you in the future.

1. What areas do you currently market your business in? _____

2. What products or services do you sell? _____

3. How long have you been in business? _____

4. Based on your opinion, do you feel that there is room in the marketplace for my business?

Yes No Other Explain: _____

Additional Comments: _____

Business Name

Owner/Manager

Date

The letter below can be used along with the Market Research letter when approaching your Central Kootenay competitor's for feedback. Extra copies of this "Competition Explanation" form can be obtained at www.futures.bc.ca under the Self-Employment Program tab then the Download Forms tab.

Community Futures is a non-profit entrepreneurial support organization for the residents of the Central Kootenay Region. Since inception in 1984, Community Futures has helped over 1,675 Central Kootenay businesses to create over 1,600 additional jobs.

We have a variety of programs and services available to assist both established businesses as well as new entrepreneurs. These services include:

- ✍ Commercial loans for new or existing entrepreneurs
- ✍ Self-Employment Program (training & basic income support) for individuals currently collecting EI or for individuals who are unemployed and have had an EI claim in the previous 3 years
- ✍ Business Plan Training, Business Management Seminars, Customized Training Programs for existing businesses
- ✍ Business Resource Library
- ✍ Free business counselling appointments available throughout the region
- ✍ Free internet access for business plan research

To access either Commercial Loans or the Self-Employment Program, applicants must develop a thorough business plan that includes comprehensive competitive analysis.

Community Futures requests that applicants to the Self-Employment Program approach their Central Kootenay competition to introduce themselves, discuss local market conditions etc., and to ask the competition to complete a Market Research form.

The overall mandate of the Self-Employment Program is employment creation through self-employment. Each applicant's business idea is assessed for viability using many criteria, one of which is "room in the market". It is not the Program's intent to approve a new business if there is strong evidence that the existing market will not support another business.

Community Futures values the opinion of existing businesses and all of the competitor's comments will be taken into consideration when decisions are being made about supporting a new entrepreneur. In cases where the competitors have opposing views on the market, we will rely on all of the information presented by the applicant and the competitors when deciding whether or not to approve support for the business. Philosophical opposition to the Self Employment Program will not be considered as rationale for assessing whether or not there is "room in the market."

Any comments you may have regarding this application, can be returned directly to the applicant, or if you prefer, you may send your comments in confidence to Barb Williams, Self-Employment Program Coordinator at:

Fax: (250) 352-5926 Email: bwilliams@futures.bc.ca
Mail: Attn: Barb Williams
Community Futures
201 – 514 Vernon Street
Nelson, BC V1L 4E7

Thank you for your input. If you have any further questions, please feel free to contact Community Futures at (250) 352-1933.

This is required information for your business plan; you may use this form or present the same information in your own format. The "Marketing & Promotional Strategy" form can be downloaded at www.futures.bc.ca under the Self-Employment Program tab then the Download Forms tab.

MARKETING & PROMOTIONAL STRATEGY

METHOD		COST
<p>Include all strategies (both paid and free) that you will do monthly to promote your business. i.e., Pennywise Ad, Business Cards, Phone Calls, etc., Keep in mind the relation of the months to your busy/slow times. Don't forget to include your low or no cost strategies as well.</p>		<p>\$ for each method listed</p>
1st Month		
2nd Month		
3rd Month		
4th Month		
5th Month		
6th Month		
7th Month		
8th Month		
9th Month		
10th Month		
11th Month		
12th Month		
Total Cost		\$

ABC Manufacturing Company - (Sample)														
Cash Flow Budget	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Jan-06	Feb-06	Mar-06	Apr-06	May-06	Jun-06	Jul-06	TOTAL
	START-UP	MTH 1	MTH 2	Mth 3	Mth 4	Mth 5	Mth 6	Mth 7	Mth 8	Mth 9	Mth 10	Mth 11	Mth 12	
CASH RECEIVED														
Wholesale Sales		1,000	2,500	2,400	3,800	4,700	1,000	900	2,300	2,700	4,600	3,500	4,400	33,800
Retail Sales				600	3,200	300		100	200	2,300	7,400	500	600	15,200
Personal Investment (Cash Only)	1,000													1,000
Loan Proceeds	5,000													5,000
SE Grant	1,280	1,280	1,920	1,280	1,280	1,280	1,280	1,280	1,280	1,280	640			14,080
														0
														0
														0
TOTAL CASH RECEIVED	7,280	2,280	4,420	4,280	8,280	6,280	2,280	2,280	3,780	6,280	12,640	4,000	5,000	69,080
CASH PAID OUT (EXPENSES)														
Owner's Drawings	1,100	1,100	1,900	1,100	1,100	2,000	1,100	1,100	1,100	1,100	1,100	2,500	1,100	17,400
Equipment > \$200	2,000													2,000
Raw Material Purchases	1,000	440	1,100	1,188	2,376	2,134	440	418	1,056	1,694	3,652	1,650	2,068	19,216
Packaging Materials	200			200	200	250	100	100	100	300	300	200	200	2,150
Office Supplies	50			50			50			50			50	250
Repair & Maintenance	100			45			45		45		45		45	325
Vehicle Expenses (gas/repairs)	25	25	25	25	200	25	25	25	25	200	300	25	25	950
Insurance/Registration/Licenses	75	225	50	50	50	50	50	50	50	50	50	50	50	850
Advertising & Promotion	500	750	200	400	175	100	200	200	400	450	300	300	300	4,275
Website Expenses	75			300	1,500	25	225	25	225	25	225	25	225	2,875
Telephone Expense	175	80	80	80	80	80	80	80	80	80	80	80	80	1,135
Internet Expense	25	25	25	25	25	25	25	25	25	25	25	25	25	325
Rent Expense	350	500	500	500	500	500	500	500	500	500	500	2,000	500	7,850
Utilities Expense	100		100		150		200		100		100		100	850
Accounting/Legal Expense								400						400
Travel/Meals Expense					200					200	200			600
Loan Payment		227	227	227	227	227	227	227	227	227	227	227	227	2,724
Miscellaneous	100	100	100	100	100	100	100	100	100	100	100	100	100	1,300
Small Tools			10		50		50		50		50		50	260
														0
TOTAL CASH OUT	5,875	3,472	4,317	4,290	6,933	5,516	3,417	3,250	4,083	5,001	7,254	7,182	5,145	65,735
SUMMARY														
Total Cash Received	7,280	2,280	4,420	4,280	8,280	6,280	2,280	2,280	3,780	6,280	12,640	4,000	5,000	69,080
Total Cash Out	5,875	3,472	4,317	4,290	6,933	5,516	3,417	3,250	4,083	5,001	7,254	7,182	5,145	65,735
Cash Over/(Short)	1,405	(1,192)	103	(10)	1,347	764	(1,137)	(970)	(303)	1,279	5,386	(3,182)	(145)	3,345
CUMULATIVE CASH TOTAL	1,405	213	316	306	1,653	2,417	1,280	310	7	1,286	6,672	3,490	3,345	

Sample – Cash Flow Assumptions for ABC Manufacturing Company

Cash Sales –

Letter of Intent - DEF Co. – The letter of intent indicated purchasing between 1-7 units each month. I have conservatively estimated the sales for the cash flow.

Letter of Intent – GHI Co. – This letter of intent indicated purchasing between 1-12 units monthly. Again, I have conservatively estimated the sales for the cash flow.

Contracts with XYZ & JKL Company have been signed. According to contracts these figures represent the minimum sales volume anticipated over the first year.

Trade Shows – October sales are based on average booth sales for Fall Fair in Nelson.

November is based on average vendor sales for Christmas Fair in Granville Island.

April sales are based on attending Cranbrook Home Show and May the Vandussan Garden Show in the Lower Mainland (again reflecting average vendor sales).

Additional Sales Target – Based on my marketing strategy and exposure, I am anticipating further development of my customer base through local individual sales. I have budgeted for an additional 13 units to be sold over the year at full retail price.

Letters of Intent, Contracts, and Trade Fair Registration Forms are found in Appendix C.

	Wholesale				Retail		Total
	Letter of Intent - DEF Co.	Letter of Intent - GHI Co.	Contract - XYZ Co.	Contract - JKL Co.	Trade Show	Additional Sales Target	
Aug-05		100	500	400			1,000
Sep-05	200	100	1,000	1,200			2,500
Oct-05	200	200	900	1,100	500	100	3,000
Nov-05	200	500	1,500	1,600	3,000	200	7,000
Dec-05	300	400	2,000	2,000		300	5,000
Jan-06	100	100	400	400			1,000
Feb-06	100		400	400		100	1,000
Mar-06	200	100	700	1,300		200	2,500
Apr-06	200	200	1,000	1,300	2,000	300	5,000
May-06	200	200	2,000	2,200	7,000	400	12,000
Jun-06	200	200	1,600	1,500		500	4,000
Jul-06	200	200	2,000	2,000		600	5,000
							49,000

Personal Investment - \$1000 cash has been deposited to ABC Company's bank account. The statement is attached in Appendix D.

Loan Proceeds - \$5,000 loan has been approved through Credit Union. Terms are 2-year repayment and 8% interest rate. Copies of the loan documents are in Appendix D.

SE Grant – I am anticipating payment of \$320/week paid bi-weekly. Due to bi-weekly schedule, there will be 3 payments received in September 2005. May of 2006 will only be one payment as maximum contract length has been reached.

Owners Drawings – Based on my Personal Monthly Budget found in Appendix E, I need to draw a minimum of \$1,100 per month to meet personal expenses. September has an additional \$800 being budgeted for house insurance. December has an increase of \$900 for Christmas expenses. June has an increase of \$1,400 as property taxes are due.

Equipment > \$500 - Joiner \$1,000; Table Saw \$500 and Lathe \$500. Quotes are attached in Appendix F.

Raw Material Purchases – Initial inventory of \$1000 will be purchased in July 05. I am budgeting monthly purchases of additional materials equal to the cost of goods sold that month plus 10% in order to grow the inventory. Cost of Goods Sold is 40% on wholesale sales and 20% on retail sales.

Packaging Materials – Initial purchase of \$200 in July 05. I am budgeting to replenish these materials based on an average cost of \$2.50/unit. Materials are readily available so it is not necessary to maintain a large inventory.

Office Supplies – Pens, paper, invoices, stationery, envelopes, etc. I have budgeted an initial purchase of \$50 and a quarterly replenishment of \$50 throughout the year.

Repairs & Maintenance - \$100 is budgeted in July to paint the interior of my rented shop. Periodic budget of \$45 is for sharpening of saw blades. As the equipment being purchased is new and under warranty, I am not expecting any additional repair costs for the first year.

Vehicle Expenses – On a monthly basis, I am anticipating an additional \$25 being spent each month for business use. I have road trips planned to attend Trade Shows in November, April and May that will require additional expense.

Insurance/Registrations/Licenses – In July, I will use the one stop system to do the Name Search and Declaration for a cost of \$75. August 1st the business license will be purchased for \$125. Also in August my business insurance will be set up. I will make regular monthly payments of \$50 over the year, but the August payment has a \$50 charge attached for choosing the equal payment option. The Name Search form, business license application and quote for business insurance are found in Appendix G.

Advertising & Promotion –

July	Shop sign \$500
Aug	Business Cards \$100, Vehicle Signage \$250, Portfolio development \$400
Sep	Grand Opening Invitations/Event \$200
Oct	Trade Fair booth registration \$400
Nov	Portfolio Printing/Mailing \$175
Dec	Christmas cards/gifts to repeat customers \$100
Jan	Portfolio Printing/Mailing \$200
Feb	Portfolio Printing/Mailing \$200
Mar	Trade Fair booth registration \$300, Portfolio Printing/Mailing \$100
Apr	Trade Fair booth registration \$350, Portfolio Printing/Mailing \$100
May	Portfolio Printing/Mailing \$200, Business Cards \$100
Jun	Portfolio Printing/Mailing \$300
Jul	Portfolio Printing/Mailing \$300

Website Expenses – Domain name registration \$75 in July. I am hiring URV Web Design to build my web site a \$300 deposit is due in October. The site will be finished in November with \$1500 due on launch (which includes the first months hosting fee). Regular monthly hosting fee for the site will be \$25/month. I am budgeting and additional \$200 every-other month to cover the cost of web site optimization.

Telephone Expense – I will be securing a cell phone to use as my primary business number. The initial cost for the phone and set up is \$175 and I am choosing a suitable small business bundle for \$80/month, which includes 1000 minutes/month local, and long distance calling.

Internet Expense – My high speed connection for email and internet business use is \$25/month.

Rent Expense – I have secured a 5-year lease plus triple net for \$500/mth and the annual property taxes starting June 2006. July 2005 payment is reduced to \$350, as I do not have access to the shop until July 10. In June 2006, I am required to pay property taxes as per the lease and estimate the tax to be \$1500 based on previous years assessment and 4% increase. Lease agreement is in Appendix H.

Utilities Expense – I am only required to pay electrical charges. Heat is covered through the lease. I have budgeted for electrical based on previous renters utility bills as per City Hall.

Accounting/Legal – I do not anticipate incurring any legal expenses this year. I will hire MNO Accounting to do my year-end income tax filing. They have provided me with a quote of \$400 based on me providing balanced journals and reconciled bank statements.

Travel/Meals Expense – I have budgeted \$200 per planned trade show road trip to cover the cost of meals. In all locations, I have family and friends who I will be able to stay with so I won't need to pay for accommodations.

Loan Payment - Loan payments are \$227/month with the first payment due on August 15th.

Miscellaneous – I have budgeted \$100/month for unidentified costs.

Small Tools – I currently have all the small tools needed. I am budgeting to replace tools as they are worn or to purchase new tools as the cash flow becomes available.

ABC Manufacturing Company
Projected Income Statement
For Year Ending July 31, 2006

Revenue:

Sales Income	<u>49,000</u>
Cost of Sales:	
Opening Inventory	<u>0</u>
Add: Purchases	<u>21,366</u>
Cost of Goods Available for Sale	<u>21,366</u>
Less: Ending Inventory	<u>2,736</u>
Cost of Goods Sold	<u>18,630</u>

Gross Profit

30,370

Expenses:

Office Supplies	<u>250</u>
Repair & Maintenance	<u>325</u>
Vehicle Expenses	<u>950</u>
Insurance/Registration/Licenses	<u>850</u>
Advertising & Promotion	<u>4,275</u>
Website Expenses	<u>2,875</u>
Telephone Expenses	<u>1,135</u>
Internet Expenses	<u>325</u>
Rent Expense	<u>7,850</u>
Utilities Expense	<u>850</u>
Accounting/Legal Expense	<u>400</u>
Travel/Meals Expense	<u>600</u>
Loan Payment	<u>2,724</u>
Miscellaneous	<u>1,300</u>
Small Tools	<u>260</u>
Total Expenses	<u>24,969</u>

Net Profit or (Net Loss)

5,401

Sample

This is required information for your business plan; you may use this form or present the same information in your own format. The "Personal Monthly Expenses" can be downloaded at www.futures.bc.ca under the Self-Employment Program tab then the Download Forms tab.

PERSONAL MONTHLY EXPENSES

Rent or Mortgage Payment	\$ _____
Food	_____
Phone	_____
Heat	_____
Light	_____
Car Expenses (include car insurance if paid monthly)	_____
Clothing	_____
Childcare Expenses	_____
Disability/Life/Home Insurance	_____
Entertainment	_____
Medical Expenses	_____
Miscellaneous	_____
Total Expenses	\$ _____
Less:	
Other Sources of Household Income (Spouse's income, pension, child support)	- _____

TOTAL * \$ _____
=====

Transfer this monthly total to the cash flow, and identify it as Owner's Drawings.

QUARTERLY OR YEARLY EXPENSES

House Insurance	\$ _____	Month(s) _____
Car Insurance	\$ _____	Month(s) _____
Life Insurance	\$ _____	Month(s) _____
Taxes (property, water/sewer, personal income tax)	\$ _____	Month(s) _____
Other	\$ _____	Month(s) _____
Christmas/Birthdays etc.	\$ _____	Month(s) _____

Transfer each expense to the cash flow as owner's drawings, in the month you expect to pay it.

Things to consider when developing your Personal Monthly Budget:

Basic phone rentals & estimated long distance charges.

Utility payments – fluctuating or equal monthly payments?

Repair & Maintenance on your home.

Review your vehicle expenses for the past few months. When do you have your car serviced, amounts? - new tires, battery etc.

Do you need new clothing - if children, new school clothes, change of season clothing, etc.

Cable service, video rentals, golfing, skiing, bowling fees, gym memberships.

When are your loans scheduled to be paid off, new loans anticipated?

Are you covered by an extended medical insurance plan or do you pay your own, etc.

Do you smoke?

Do you pay house and vehicle insurance monthly, quarterly or once a year?

Day care?

If you have a house - do not forget property taxes.

How often & when do you pay water and sewer?

Are you going to have to pay income taxes next year? Self employed persons also have to pay CPP on net business income. If you owe more than \$2,000 in a given tax year you may be required to submit on a quarterly basis relative portion. i.e. $\$2,000/4 = \500 - June, September, December and March.

Other sources of household income(s): these will be net revenues that are expected to be received on a more or less permanent basis. – Spouse's income, child tax credit, investments, etc.

You should not include items such as overtime, bonuses, lottery winnings, etc. as they are not of a guaranteed nature - if possibly forthcoming, consider them more of a safeguard against low expense estimates.

Potential Sources of Research Information:

Bank, credit card, utility/water & sewer bill statements.

Previous receipts related to food, vehicle repairs, clothing, entertainment, etc.

Previous year's property tax statement.

Previous year's income tax statements - Payment/Refund?

Combined Personal and Spouse Equity Statement

Personal Statement of Finances as of: _____

Month Day Year

Assets	Institution	\$ Amount	Liabilities	Institution	\$ Amount
Cash			Mortgage		
RRSPs			Loans		
Stocks, Bonds, Mutual Funds			Student Loans		
Real Estate (tax assessed value)			Taxes Payable		
Automobile #1 (make, year, model)			Credit Card Payable #1		
Automobile #2 (make, year, model)			Other		
Personal & household effects					
Other					
Total Assets (A)		\$	Total Liabilities (B)		\$
Total Personal Equity (A-B)					\$



EXECUTIVE SUMMARY

SUBMITTED BY:

Name: _____

Phone #: _____

INSTRUCTIONS:

After you have completed your business plan, fill out the attached Executive Summary for funding review by the Self Employment Committee. This is your opportunity to sell yourself and the highlights of your proposed business. Your business plan will be reviewed in its entirety by the Self-Employment Co-ordinator. You should be ready to start your business immediately once the funding approval has been given.

Please be sure that all of the information is correct, legible and written or typed with a dark ink. You may add one additional page to this summary if you require further space. (Maximum submission including this title page is 7 pages.)

If you have any questions or need further assistance, please don't hesitate to call our office at (250) 352-1933.

GOOD LUCK!

This Executive Summary is for an extension from the Start Smart Program to the regular Self Employment Program. Yes or No

For Office Use Only: Summary of Funding Request			
Budget	# of week	\$/ weeks	Total
Part 1\$			\$
Part 2\$ Top Up			\$
Part 2\$			\$
Total Funding Request			\$
First Review:		Second Review:	

APPLICANT'S NAME: _____

PROPOSED BUSINESS' NAME: _____

LOCATION OF BUSINESS: _____

DESCRIPTION OF PRODUCT OR SERVICE: _____

WHAT TRAINING OR EXPERIENCE DO YOU HAVE THAT WOULD PREPARE YOU FOR THIS BUSINESS?

MARKETING PLAN

HOW DO YOU INTEND TO PROMOTE YOUR BUSINESS? _____

HOW DO YOU INTEND TO SELL YOUR PRODUCT? WHAT IS YOUR SALES PLAN (i.e. cold calls, distributors, sales rep)? _____

DESCRIBE YOUR TARGET CUSTOMER: _____

WHAT IS YOUR MARKET AREA? _____



COMPETITION

IF YOU PLAN TO MARKET WITHIN THE CENTRAL KOOTENAY REGION, PLEASE LIST YOUR REGIONAL COMPETITION AND INDICATE THEIR RESPONSE TO THE MARKET RESEARCH LETTER.

IF MORE SPACE IS REQUIRED, PLEASE ATTACH AN ADDITIONAL SHEET.

NAME OF COMPETITOR	DID YOU RECEIVE A LETTER OF SUPPORT?	IF NOT, WHY? (CIRCLE ONE)	DID THE LETTER HAVE ANY CONDITIONS?	WAS THE LETTER (CIRCLE ONE):
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT
	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	NO RESPONSE BACK OUT OF TOWN NOT SUPPORTIVE OTHER	Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/>	POSITIVE NEGATIVE INDIFFERENT

COMMENTS: (Fill in if you chose OTHER as a reason for not receiving a letter of support): _____

OPERATIONAL PLAN

DO YOU HAVE ALL OF THE EQUIPMENT NECESSARY TO START THIS BUSINESS?
YES or NO

WILL YOU BE HIRING EMPLOYEES DURING THE FIRST YEAR? YES or NO

HOW MANY? _____ EXPECTED WAGE(S)/HOUR? _____

FINANCIAL PLAN

WHAT IS THE AVERAGE SELLING PRICE OF YOUR PRODUCT OR SERVICE? _____

WHAT IS YOUR PERSONAL INVESTMENT IN THIS BUSINESS (VALUE PERSONAL ASSETS AT A FAIR MARKET VALUE)?

CASH	\$	VEHICLE	\$
TOOLS & EQUIPMENT	\$	SUPPLIES/INVENTORY	\$
BANK FINANCING	\$	LINE OF CREDIT	\$

CFDC FINANCING	\$	OTHER FINANCING	\$
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SELF-EMPLOYMENT PROGRAM

Participant Information Form

Instructions: Include this completed form in the appendices of your business plan. A copy of this form will be faxed to the referral agency indicated on your Self-Assessment Form & Action Plan.

Business Name: _____

First/Last Name: _____

Social Insurance Number: _____ Birthdate: _____

Business Partner(s) Name(s): _____

Business Phone #: _____ Home Phone #: _____

Cell or Toll Free #: _____ Fax #: _____

E-mail address: _____

Web site address: _____

Mailing Address: _____

City: _____ Postal Code: _____

Home Address: _____

City: _____ Postal Code: _____

Business Location Address: _____

City: _____ Postal Code: _____

Do you speak or write a second language?

English French Other: _____

Do you have a current driver's license? Yes No What Class _____

Last Grade or Highest Level of Education Completed: _____

Are you:

Aboriginal <input checked="" type="checkbox"/>	Visible Minority <input checked="" type="checkbox"/>
Disabled <input checked="" type="checkbox"/>	Displaced (out of work after 5 or more years in the same occupation) <input checked="" type="checkbox"/>
50 years or older <input checked="" type="checkbox"/>	30 years or younger <input checked="" type="checkbox"/>

At the date of this application:

	Yes	No
Are you currently eligible for or receiving EI benefits?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Are you currently receiving BC Benefits?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Have you had an EI claim in the past 3 years?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Have you had a maternity or paternity EI claim in the past 5 years?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Attach a recent print out of your "My EI Online" statement titled "My Current Claim" showing your current claim status.

CLIENT CONSENT

I authorize Community Futures Central Kootenay to disclose the following contact information and description of my business to the general public. This disclosure could be in the form of Client Directories, business referrals, or mentions in advertising, presentations or promotions initiated by Community Futures:

Business Name:	Contact Person:
Phone #:	Email:
Website:	Snail Mail:

Description (maximum 256 characters) of your business's products and or services.

Signature of Client:	
Please Print Name:	
Date:	

CLIENT CONSENT TO EXCHANGE INFORMATION BETWEEN AGENCIES

I authorize Service Canada, Ministry of Human Resources, Community Futures Central Kootenay, Career Development Services, Kootenay Employment Services, Ashland Training Centre and Outreach Employment Services to exchange/disclose my personal information with regard to my application for the Community Futures' Self-Employment Program.

Signature of Client:	
Please Print Name:	
Date:	

Self-Assessment Form

Instructions: This form is to be included in the appendices of your business plan. A copy of this form along with a copy of your resume will be faxed to Career Development Services (Nelson area), Ashland Training Centre (Castlegar area), Kootenay Employment Services (Creston area), or Outreach Employment Services (Nakusp & Upper Slocan Valley areas).

Please indicate which one of the above referral agencies you would like to use:

First/Last Name: _____

1. Before considering self-employment, can you identify any difficulties/barriers/problems that you experienced in searching for employment?

	No work in immediate area		Over qualified
	Skills Obsolete		Medical Reasons
	Spouse is employed in area/don't want to move		Kids in school in area/don't want to move
	Transportation problems		Age
	Other		Other

2. Why are you interested in being self-employed? (Check the three most important points, in order of priority 1, 2, 3)

	To be my own boss		To be independent
	To work irregular hours		To work at home
	To work in an area that I enjoy		To run a family business
	To earn a good income		To continue to care for my family while I work
	To get off employment insurance/welfare		Other reasons:

3. What help would you need in order to become self-employed? (Check (✓) all that apply.)

	Training in how to start a business		Training in how to manage a business
	Training in a specific skill (explain):		
	Help in making business contacts		Help with building self-confidence
	One-on-one business counselling		Personal counselling (family problems, stress, etc.)
	Help in finding money for start-up costs		Child care assistance
	Continued financial assistance while starting a business		Bookkeeping
	Computer skills		Other reasons:

4. Have you attended the Business Plan Workshops offered by Community Futures?
 Yes ✍ No ✍

Dates of the Workshops _____

5. Have you researched and completed your Business Plan? Yes ✍ No ✍

6. Please describe any other steps you have already taken to become self-employed:

7. Do you have any skills or experiences that relate to your business idea?

8. Please list and describe briefly any business development training or business counselling you have already received:

9. What are your greatest concerns about starting a business?

10. Do you have any other comments about starting a business?

11. Have you ever owned a business before? YES ✍ NO ✍

If yes, how long was the business in operation? _____

Please describe the type of business: _____

12. What is the size of your household? Number of Adults _____

Number of children _____ Ages _____

CERTIFICATION FORM

Instructions: Include this completed form in the appendices of your business plan.

I certify that all of the information, given by me in this business plan application for the Self-Employment Program, is true and complete to the best of my knowledge, including, but not limited to the following:

- 1. I am a resident of the Central Kootenay region.**
- 2. I am eligible for or currently receiving Employment Insurance (EI) or BC Benefits or I have had an EI claim within the past three years or a maternity/parental claim within the last five years.**
- 3. I am starting a new business or plan on purchasing the assets of a business that I have not had any prior ownership in.**
- 4. The proposed business is not yet in operation or if I am purchasing a business I have not yet taken control of ownership.**
- 5. There is no outside party controlling my business and I hold a majority interest in this venture.**
- 6. The business income will not be derived from more than 10% of commission or consignment sales.**
- 7. I intend to work full-time at my proposed business.**
- 8. I will be responsible to maintain a full set of business records and abide by all government regulations that pertain to my business.**
- 9. I will attend the required business development workshops provided by Community Futures under the terms of my Self-Employment contract.**
- 10. I will submit monthly financial and business progress reports to Community Futures.**
- 11. I will allow my name to be made public by Community Futures in such ways as press releases, radio or newspaper ads, trade fairs, client directories, etc.**
- 12. I will inform Community Futures immediately if I decided to take time off from my business or if I become ill and cannot operate my business.**
- 13. I will inform Community Futures if I am out-of-town on business related trips.**
- 14. I will operate my business in the way presented in my business plan, or I will seek permission from Community Futures to make any major changes.**
- 15. I recognize that, if I fail to comply with the above 14 points, my Self-Employment contract could be suspended.**

I authorize the staff of Community Futures Development Corporation of Central Kootenay to make all necessary investigations, in regards to my business plan, to verify that my application falls within the guidelines of the Self-Employment program.

Signature of Applicant

Date



SELF-EMPLOYMENT PROGRAM

Environmental Assessment
Questionnaire

Instructions: This completed form is to be included in the appendices of your business plan.

First/Last Name: _____

Business Name: _____

1. Will you be applying, or have you applied, to any other federal department or agency for funding, permits or authorizations, or for the use, lease, or sale of land related to this project? **Yes** **No**
- If yes, fill in the table:

Department	Nature of Department's Involvement in Project	Phone #	Contact Name

2. Has an environmental assessment of this project been done or is one in the process of being undertaken? **Yes** **No**
 (If yes, please provide a copy of the environmental assessment report. If a copy is not available, or is in the process of being produced, indicate the name, address, and telephone number of an individual who should be contacted for a copy.)
3. Will the project activities involve construction, operation, modification, decommissioning or abandonment of a structure? **Yes** **No** If yes, provide details in an attached document.
4. Will the project occur in, on, or within 30 metres of any water body or wetland? **Yes** **No** If yes, provide details in an attached document.
5. Is the project likely to release any polluting substance into a water body or wetland during construction and/or after the project begins operation? (Example: silting, chemicals, waste, etc.) **Yes** **No** If yes, provide details in an attached document.
6. Does the project involve the cleanup, storage, handling, use or disposal of potentially hazardous materials? (Example: chemically-treated wood, lead-based paints, PCBs, asbestos, oil or gas tanks, resin, toxins, pesticides, fertilizers, caustic substances, etc.) **Yes** **No** If yes, provide details in an attached document.
7. Will heavy equipment be used during the project, or once the project is operational? **Yes** **No** If yes, provide details in an attached document.
8. Does your project occur in an undeveloped area? **Yes** **No** If yes, advise if there will be cutting or removal of trees or shrubs from an area greater than 1,000 square meters, or clearing or removal of all vegetation from an area greater than 500 square meters.

9. If there are any environmental concerns, has the public been consulted or are there plans to consult the public with regards to this project?
Yes there are concerns ✍ No concerns ✍

If yes, describe the level and means of public consultation (town-hall meetings, focus groups, advertising notices and level of response, one-on-one or small group meetings with concerned citizens, groups or neighbours to the project, etc.).

10. If applicable, describe the level of public support and/or concerns expressed with regards to the public's environmental concerns for the construction/start-up or operations of your proposed business.
describe the nature (verbal, letters, media, etc.) of the sensitivity and any action(s) taken to assess/address the concerns.

11. If the project involves restoration or refurbishing of an existing building or structure, or is a new construction, is there any chance that lead based paints will be scraped, sanded, sand blasted or newly applied; or, will any kind of fuel tank be removed or installed?
Yes ✍ No ✍ If yes, provide details in an attached document.

12. Are additional phases to the project planned or envisioned relating to this project?
Yes ✍ No ✍ If yes, provide details in an attached document.

13. Are there other pertinent details concerning the project that could impact on the environment? Yes ✍ No ✍ If yes, provide details in an attached document.

Signature: _____ **Date:** _____

Title/Position: _____ **Telephone:** _____