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APPLICATION FOR FINANCIAL ASSISTANCE

The Business Development Fund (BDF) is used to help meet the financial needs of small businesses in Nunavut by providing contributions. These contributions, which do not have to be repaid, are given to businesses that are working to build a stronger economy in Nunavut. Projects approved for funding will promote community development, business growth, training and increase in jobs and income.

A) Financial Assistance Requested: (Please check one)

- Planning & Development
- Business Creation & Expansion
- Marketing
- Training
- Business Relief

Contact Person:	Position in the business:
Business Name:	Phone: (Home/Work/Cell)
Community:	Email:
Address: (Civic number/Street name/PO Box)	<input type="checkbox"/> Proposed Business <input type="checkbox"/> New Business <input type="checkbox"/> Existing Business, Since: _____
Commercial Activities:	<input type="checkbox"/> Sole Owner <input type="checkbox"/> Partnership* <input type="checkbox"/> Corporation* <input type="checkbox"/> Co-operative <i>* Provide list of partners or shareholders/officers</i>

B) Business Project Description: Brief description of project/training needs:

Project Start Date: _____ Project Finish Date: _____

C) Application Information:

Name:	Date of Birth:
SIN #:	Beneficiary # _____
Home Address:	Home Phone:
Occupation: <input type="checkbox"/> Traditional Economy (harvester/arts&crafts) <input type="checkbox"/> Stay-at-home parent <input type="checkbox"/> Between Jobs <input type="checkbox"/> Employed (full time__ part time__) Position: _____ <input type="checkbox"/> Receiving E.I. <input type="checkbox"/> Receiving Social Assistance <input type="checkbox"/> Receiving Disability Assistance <input type="checkbox"/> Self Employed <input type="checkbox"/> Student <input type="checkbox"/> Other (clarify):	Education: <input type="checkbox"/> Primary School, Grade Completed: _____ <input type="checkbox"/> High School <input type="checkbox"/> Trade School <input type="checkbox"/> On-the-Job Training <input type="checkbox"/> College/University <input type="checkbox"/> Other (clarify):

D) Estimated Project Costs:

Feasibility Study/Business Plan	\$
Equipment/Tools	\$
Operating Costs (for new businesses, first months only)	\$
Training (program and/or materials)	\$
Marketing (plan and/or activity)	\$
Relief (overdue taxes ineligible, recovery efforts only)	\$
Other (clarify)	\$
Ineligible (GST, overdue taxes, applicant's required cash)	\$
Total Project Costs:	\$

E) Previous Assistance Received (during the past 5 year):

Date (Year)	Organization	Amount
	Kivalliq Partners in Development	\$
	GN, Economic Development & Transportation	\$
	Canadian Northern Economic Development Agency	\$
		\$
		\$

F) Sources of Funding: a minimum of 10% applicant contribution is required.

Contributions to Business Development (BDF)	\$	Applicant	\$
<input type="checkbox"/> Planning & Development <input type="checkbox"/> Business Creation/Expansion <input type="checkbox"/> Marketing & Product Development <input type="checkbox"/> Training (Business Skills) <input type="checkbox"/> Business Relief		<input type="checkbox"/> Cash <input type="checkbox"/> In-kind (clarify)	
Other Contributions	\$	Loans	\$
<input type="checkbox"/> CanNor (EBD)* <input type="checkbox"/> ED&T (SBSP, SIP)* <input type="checkbox"/> Other (clarify)_____		<input type="checkbox"/> KBDC* <input type="checkbox"/> NDC* <input type="checkbox"/> NBCC* <input type="checkbox"/> Atuqtuarvik Corp	
Total Project Funds (add all columns): \$			

* *Definitions:* **CanNor (EBD)** = Canadian Northern Economic Development Agency, Entrepreneurship and Business Development
ED&T (SBSP, SIP) = GN, Economic Development & Transportation, Small Business Support, Strategic Investment Program
KBDC = Kivalliq Business Development Centre
NDC = Nunavut Development Corporation
NBCC = Nunavut Business Credit Corporation

G) Project Benefits:

How many people will be employed? (# of new jobs created/maintained) Beneficiary _____ Non-Beneficiary _____	Support for project/business received from: <input type="checkbox"/> Hamlet Council <input type="checkbox"/> Community Organization (clarify) _____ <input type="checkbox"/> Inuit Association <input type="checkbox"/> Other (clarify) _____
Amount of wages to be paid (total): \$	
How many people will be trained? Beneficiary _____ Non-Beneficiary _____ For how long?	This project/business supports: <input type="checkbox"/> Youth <input type="checkbox"/> Elders <input type="checkbox"/> Women <input type="checkbox"/> Men <input type="checkbox"/> Environment <input type="checkbox"/> Healthy Communities <input type="checkbox"/> Sustainable Livelihoods (hunting/carving/art & crafts) <input type="checkbox"/> Other (clarify)_____
% of total project costs spent in Nunavut: %	
Expected increase in business's assets: \$	
Are there environmental concerns related to the project? <input type="checkbox"/> Yes <input type="checkbox"/> No	

H) Financial Net-Worth Statement:

What You Own (Assets)	Amount or Estimated Value
Cash & Bank Account	\$ _____
Vehicles & Equipment	\$ _____
Real Estate	\$ _____
Other (clarify) _____	\$ _____
Other (clarify) _____	\$ _____
(1) Total Assets	\$ _____

What You Owe (Debt)	Balance
Loans	\$ _____
Mortgages	\$ _____
Credit Cards	\$ _____
Other (clarify) _____	\$ _____
Other (clarify) _____	\$ _____
(2) Total Debt	\$ _____

I) Sources of Income	Annual Amount
Employment	\$ _____
Self-employment	\$ _____
Passive Income	\$ _____
Social Assistance	\$ _____
Employment Insurance	\$ _____
Disability Assistance	\$ _____
Other (clarify) _____	\$ _____
Total Income	\$ _____

J) Checklist of Supporting Documents:

Supporting Documents*	Required by Business Type		
	Proposed	New	Existing
Copy of NTI Beneficiary card	x	x	x
Proof of Applicant's Cash Contribution	x	x	x
Proof of Inuit ownership (51%+)	x	x	x
Resume of Owner(s) and Partner(s)	x	x	x
Business Proposal (Description of the business, the proposed project and benefits)	x	x	x
Official/Written Quotes	x	x	x
CRA Business Number, GST Number, Payroll Number		x	x
Municipal Business License		x	x
WSCC Certificate of Registration or Compliance		x	x
Proof of Insurance Coverage		x	x
Financial Statement (up to three years back)			x

* More documents may be request by the Manager of Business Development

Declaration of Application

I do swear that I have personal knowledge of the matters discussed in this application and state that:

- To the best of my knowledge, all statement made and material provided by or on behalf of the undersigned are true and correct;
- The proposed business plan or project complies with municipal, territorial or federal laws;
- I agree to let representatives of Designated Inuit Organizations, Nunavut Tunngavik Inc., and the Kivalliq Inuit Association, access to the site and premises of the project, to inspect books, accounts, records, to make inquiries and to obtain any other information necessary to evaluate the application or the resultant project;
- I authorize the Kivalliq Inuit Association to obtain personal and credit information about me from any source;
- If approved, I agree to supply relevant receipts requested by Designated Inuit Organizations and the Kivalliq Inuit Association; and
- I make this declaration believing that it to be true and knowing that it is of the same force and effect as if made under oath.

Signed this ___ day of _____, 20 __, in the community of _____, Nunavut.

Print Name - Applicant

Print Name - Witness

Signature of Applicant

Signature of Witness