

The Inuit Opportunities Fund (IOF) is used to support economic activities related to tourism by Inuit-owned and –controlled business ventures in Baker Lake.

☐ Feasibility study; business planning; market study;
☐ Business valuation; asset condition assessments and appraisals;
☐ Legal and other professional fees; negotiation;
☐ Accounting support and training; management and technical training;
☐ Purchase of assets; operating costs of a start-up.

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

B) Business Project Description:

Project Start Date: _____ Project Finish Date: _____

C) Applicant 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 <input type="radio"/> part time <input type="radio"/> 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:

Planning, Studies	\$
Valuation, Assessment, Appraisal	\$
Operating Costs (for new businesses, first months only)	\$
Professional Fees (Legal, Negotiation)	\$
Technical/Management Support or Training	\$
Asset/Operating Costs of Start-Up	\$
Other (clarify)	\$
Ineligible (GST, overdue taxes, applicant's required cash)	\$
Total Project Costs:	\$ 0

E) Previous Assistance Received (most recent 5 years):

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



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

Business Development Fund (IOF)	\$	Applicant	\$
<input type="checkbox"/> Planning, Studies Development		Cash	
<input type="checkbox"/> Valuation, Assessment, Appraisal		In-kind (clarify)	
<input type="checkbox"/> Professional Fees (Legal, Negotiation)			
<input type="checkbox"/> Technical/Management Support-Training			
<input type="checkbox"/> Asset/Operating Costs of a Start-Up			
Other Contributions	\$	Loans	\$
<input type="checkbox"/> KIA (BDF)		<input type="checkbox"/> KBDC*	
<input type="checkbox"/> CanNor (EBD)*		<input type="checkbox"/> NDC*	
<input type="checkbox"/> ED&T (SBSP, SIP)*		<input type="checkbox"/> NBCC*	
<input type="checkbox"/> Other (clarify)		<input type="checkbox"/> Atuqtuarvik Corp	
		<input type="checkbox"/> Other:	
Total Project Funds (add all columns): \$0			

* **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)	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)
Beneficiary _____ Non-Beneficiary _____	
Amount of wages to be paid (total): \$	
How many people will be trained?	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
Beneficiary _____ Non-Beneficiary _____	
For how long?	
% of total project costs spent in Nunavut: %	
Expected increase in business's assets: \$	



Are there environmental concerns related to the project?

☐ Yes

☐ No

H) Financial Net-Worth Statement:

What You Own (Assets)

Amount or Estimated Value

Cash & Bank Account	\$ _____
Vehicles & Equipment	\$ _____
Real Estate	\$ _____
Other (clarify) _____	\$ _____
(1) Total Assets	\$ 0.00

What You Owe (Debt)

Balance

Loans	\$ _____
Mortgages	\$ _____
Credit Cards	\$ _____
Other (clarify) _____	\$ _____
(2) Total Debt	\$ 0

I) Sources of Income

Annual Amount

Employment	\$ _____
Self-employment	\$ _____
Passive Income	\$ _____
Social Assistance	\$ _____
Employment Insurance	\$ _____
Disability Assistance	\$ _____
Other (clarify) _____	\$ _____
Total Income	\$ 0



Checklist of Supporting Documents:

	Required by Business Type		
Supporting Documents*	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
Business Name Declaration (NU Legal Registries)		X	X
WSCC Certificate of Registration or Compliance		X	X
Municipal Business License		X	X
Proof of Insurance Coverage		X	X
Financial Statements (up to three years)			X

* More documents may be request by the Business Development Officer

Declaration of Applicant

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 statements 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 it to be true and knowing that it is of the same force and effect as if made under oath.

Signed this ____ day of Select Month 0 __, in the community of _____, Nunavut.

Signature of Applicant

Submit Application **Clear Form**

An email attachment will be attached from your email program and sent to kkarcza@kivalliqinuit.ca