



2009 APPLICATION FORM

The Business Centre Nipissing Parry Sound Inc
Phone: (705) 474-0626 ext. 2528
Fax: (705) 474-4493
Web: www.thebusinesscentre-nps.com



Client Contact Information

Business Name _____

Contact Name _____

Address _____

Telephone _____

Email _____

Website _____

Business Overview

What specifically will the loan be used for? Please note that a quote will be needed from at least two suppliers for each piece of equipment valued at over \$1,000.

Do you have other sources of funding for the business (personal, family or friends, etc)?

Briefly describe your back-up plan for cash shortfalls and unexpected expenses.

What are your projected repayment terms for the loan?

Monthly Payment: _____ Term of loan: _____ months

What risk factors do you feel may affect your business during the next 12 months?

References

Must provide a minimum of three references and their contact information (excluding family and friends):

Name _____

Phone Number _____

Relationship _____

Name _____

Phone Number _____

Relationship _____

Name _____

Phone Number _____

Relationship _____

Name _____

Phone Number _____

Relationship _____

Financial Overview

Please indicate monthly amounts before taxes:

Self-employment \$ _____
Wages from employment:
 Full-time \$ _____
 Part-time \$ _____
 Seasonal \$ _____
Unemployment Insurance \$ _____
Ontario Works Benefit \$ _____
Spousal support \$ _____
Pension \$ _____
Other: _____ \$ _____

Total Monthly Income \$ _____

Monthly Household Expenses

Rent/Mortgage \$ _____
Utilities \$ _____
Telephone \$ _____
Groceries \$ _____
Transportation \$ _____
Childcare \$ _____
Entertainment \$ _____
Medical \$ _____
Loan Payments \$ _____
Other: _____ \$ _____

Total Monthly Household Expenses \$ _____

Summary of Monthly Balance:

Total Monthly Income \$ _____

Less Total Monthly Expenses \$ _____

Monthly Balance \$ _____

Balance Sheet

Assets

Cash	\$ _____
Savings	\$ _____
Investments	\$ _____
Cash value of life insurance	\$ _____
Pension Plan, RRSP's	\$ _____
Residence	\$ _____
Other real property	\$ _____
Tools	\$ _____
Vehicle	\$ _____
Other: _____	\$ _____

Total Assets: \$ _____

Liabilities

Credit Cards	\$ _____
Personal loans	\$ _____
Taxes owing	\$ _____
Residential mortgage	\$ _____
Other real property	\$ _____
Tools	\$ _____
Vehicle	\$ _____
Other: _____	\$ _____

Total Liabilities \$ _____

Financial Net Worth

Total Assets \$ _____

Less Total Liabilities \$ _____

Net Worth \$ _____

Applicant Certification

I hereby declare that all the information provided in this loan application is to the best of my knowledge, true, complete and accurate. I understand that any false information given in this application and/or my accompanying materials may result in rejection of this application or immediate demand for repayment of the loan in full.

I consent that The Business Centre may obtain and exchange information regarding myself from any credit agency or from anyone with whom I currently have or with whom I previously had financial dealings.

I also consent that The Business Centre may obtain information from the references listed in my loan application.

I agree that The Business Centre may make a public announcement relating to this community loan, if approved.

I hereby understand and accept that the completion of this application in no way commits The Business Centre to advance funds or provide any credit facilities herein applied for.

IT IS AN OFFENSE TO OBTAIN OR TO ASSIST ANOTHER TO OBTAIN A LOAN BY FRAUD OR FALSE PRETENSE.

Applicant's signature: _____ Date: _____

Applicant's name (please print): _____

Applicant's signature: _____ Date: _____

Applicant's name (please print): _____

Please note that if there is more than one business partner, all owners should authorize this form.

Media Release (Optional):

I _____ hereby authorize The Business Centre to use my name and the name of my company in order to promote the TBC Development Fund to other potential borrowers and the community at large. The financial details, terms and conditions of the loan are to be kept confidential at all times.

Applicant's signature: _____ Date: _____

Applicant's name (please print): _____

Applicant's signature: _____ Date: _____

Applicant's name (please print): _____

Please note that if there is more than one business partner, all owners should authorize this form.