



FIRST PEOPLES economic growth fund

ENTREPRENEUR loan application

R. August 2015

ALL SECTIONS, APPLICABLE TO THE APPLICANT, MUST BE COMPLETED **IN FULL**, BEFORE THIS APPLICATION WILL BE CONSIDERED BY FIRST PEOPLES ECONOMIC GROWTH FUND (FPEGF).

Section A: APPLICANT'S INFORMATION (Each partner/shareholder must complete a separate application in full)

Project # _____

FPEGF Office Use Only

SURNAME: _____ **Date of Birth:** _____
Month | Day | Year

First Name: _____ **Second Name:** _____ **S.I.N. #:** _____

Status #: _____ (Please provide a copy of your Status card with this application.)

Member of (First Nation Name): _____

Driver's License #: _____ **Marital Status:** _____ **# of Dependents:** _____

Current Address: _____

City/Community: _____ **Province:** _____ **Postal Code:** _____

Home Phone: _____ **Cell:** _____ **Fax:** _____

Email: _____

Employment Information:

Employer Name & Address: _____

Phone: _____ **Occupation:** _____

How Long: _____ **Gross Annual Income:** _____

Previous Employer (if less than 3 years): _____ **How Long:** _____

Education and/or Training:

Please describe secondary and post-secondary courses and training you have received; start with the most recent. Include any degrees, certificates and designations.

Name of Institute	Year Attended	Location	Area of Study / Course	Grade / Diploma / Certification / Degree	Completed	
					Yes	No
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Spouse's Information (if applicable):

Spouse's Name: _____ Date of Birth: _____ S.I.N. #: _____
Month Day Year

Status #: _____ Member of (First Nation Name): _____

Employer Name & Address: _____ Phone #: _____

Occupation: _____ How Long: _____ Gross Annual Income: _____

Previous Employer (if less than 3 years): _____ How Long: _____

Section B: BUSINESS INFORMATION

Business Structure: Partnership* Corporation* Co-op Sole Proprietorship
 (*Each partner/shareholder must complete a separate application in full)

Other: _____

New – Proposed Business Start Date: _____
Month Day Year

Existing – Are previous financial statements available and attached? _____

Acquisition

Business Name: _____

Business Mailing Address: _____

Location of Existing or Proposed Business (if different from above): _____

Phone: _____ Fax: _____ Email: _____

Number of jobs being created (including owner's): Full-Time: _____ Part-Time: _____

Number of jobs being maintained (including owner's): Full-Time: _____ Part-Time: _____

Business Ownership (Each partner/shareholder must complete a separate application in full):		
Name(s) of Owner(s) / Shareholder(s)	Name of First Nation	% of Ownership

Please provide a brief description of the project and list the main reasons you believe your business will succeed.

If this is an existing business, please provide a brief history.

Section C: FINANCIAL INFORMATION

Project Costs & Financing:

Project Costs	\$ _____
Land	\$ _____
Buildings	\$ _____
Equipment	\$ _____
Vehicles	\$ _____
Inventory	\$ _____
Operating	\$ _____
Licenses/Fees	\$ _____
Other (specify) _____	\$ _____
FPEGF Cost Recovery Fee (1% of Loan)	\$ _____
Other Borrowing Costs	\$ _____
Total Project Costs	\$ _____

Sources of Financing:

Equity – Cash	\$ _____
Equity – Assets	\$ _____
Equity – Other	\$ _____
FPEGF Loan	\$ _____
FPEGF Non-Repayable Contribution	\$ _____
Government (specify) _____	\$ _____
Government (specify) _____	\$ _____
Other (specify) _____	\$ _____
First Nation Contribution	\$ _____
Total Financing	\$ _____

Summary of Net Worth:

Cash and/or Bank Balance	\$ _____	Charge Accounts (Credit Cards)	\$ _____
Real Estate	\$ _____	Mortgages	\$ _____
Vehicles	\$ _____	Loans – Vehicle	\$ _____
Equipment	\$ _____	Loans – Equipment	\$ _____
Inventory	\$ _____	Loans – Personal	\$ _____
Other (specify) _____	\$ _____	Accounts Payable	\$ _____
Other (specify) _____	\$ _____	Other (specify) _____	\$ _____
Total Assets (A)	\$ _____	Total Liabilities (B)	\$ _____

Net Worth: A – B = \$ _____

Bank Information:

Bank Name: _____

Branch Address: _____

Contact Name: _____ Phone: _____ Fax: _____

Existing limit on Operating Line of Credit (if applicable): \$ _____

Details of Loans & Lines of Credit:

Holder of Debt Name of Institution / Individual	Purpose of Loan	Maturity Date	Current Balance	Monthly Payment

Section D: CREDIT INFORMATION & DISCLAIMER

The Applicant hereby authorizes First Peoples Economic Growth Fund Inc. to conduct any credit checks, inquiries, and property searches from other agencies and sources it deems appropriate to reach a decision on this application or necessary to administer the financial assistance under this Program and consents to the disclosure at any time of any credit information about the applicant to any credit reporting agency or to anyone with whom I/we have financial relations.

Declaration:

The statements and information herein and those attached which form part of this application are for the express purpose of obtaining financial assistance from First Peoples Economic Growth Fund Inc. and are to the best of my/our knowledge and belief, true and correct.

The Applicant hereby declares that none of the principals or guarantors are undischarged bankrupts or have any bankruptcy proceedings in existence with respect to themselves or companies which they operate. The Applicant hereby further declares that he/she is not associated (that is an officer or child of an officer or director) with First Peoples Economic Growth Fund Inc.

Right to Publicize:

The Applicant hereby grants First Peoples Economic Growth Fund Inc. the right to make public announcements related to the financing approved, to erect signs or other notices on the site of projects involving construction or expansion of an existing enterprise, and in general, may publicize or advertise any details related to the financing approved.

Cost Recovery Fee:

First Peoples Economic Growth Fund Inc. will charge a Cost Recovery Fee of 1% of the approved loan.

The Applicant hereby declares that he/she is a member of _____ First Nation.

_____	_____	_____
Applicant Signature	Print Name	Date
_____	_____	_____
Witness Signature	Print Name	Date

Have you:

- completed all sections of this application form IN FULL, which are applicable to the Applicant?
- attached a copy of your Status card to this application?
- attached your detailed Business Plan, including Cash Flow, Income/Expense and Balance Sheet Projections?

If an existing business, have you:

- attached previous financial statements?