



Enaadmaagehjik o/a Wikwemikong Development Commission

2102 Wikwemikong Way

Wikwemikong ON, P0P 2J0

Tel: (705) 859-3001

Fax: (705) 859-2000

Business Assistance Application

PERSONAL INFORMATION

First & Last Name:			
Band #:		S.I.N.:	
Address:			
City:		Province:	
Phone:		Postal Code:	
Email:			
Highest Level of Education:			
Special Skill/ Training or Certificates Received:			

BUSINESS INFORMATION

Business Name:			
Website:			
Address:			
City		Province:	
Phone:		Postal Code:	
Number of Employees:			
Business Structure:	Sole Proprietorship / Partnership / Corporation		
Licenses/Permits:	WUIR Business Permit / Vendor's Permit/ WSIB		
Insurance	YES / NO		

EMPLOYMENT SITUATION

Are You Currently Employed:	YES / NO		
Name of Employer:			
Employers Address:		Province:	
Years Worked :		Postal Code:	
Annual Income:			
Sources of Income (other than employment):			

CREDIT HISTORY INFORMATION

Do you have any current or outstanding loans or credit accounts with:

ORGANIZATION	TYPE	DATE	AMOUNT	MONTHLY PAYMENT	BALANCE OWING
WDC					
Wii-nin-guch tood LDM					
Wikwemikong Housing					
Wikwemikong Public Works					
OTHER (PLEASE LIST BELOW)					

Are you current with all of your debts? **YES / NO**

Do you have a loan guarantee with the Wikwemikong Unceded Indian Reserve? **YES/NO**

If yes, what is the amount, terms and balance remaining on the guarantee?

PROJECT DESCRIPTION

Please provide at least three (3) quotes for capital items.

Item	Cost
_____	_____
_____	_____
_____	_____

Total Project Cost

SOURCE OF FUNDS

Source	Amount
Owners' Equity	_____
CEDO Loan	_____
CEDO Forgivable Loan	_____
Revolving Loan Fund	_____
Waubetek Loan	_____
Other (Please List)	_____
1) _____	_____
2) _____	_____
Total Funding	_____

REQUIRED ATTACHMENTS

Existing Businesses: Must provide current financial statements and feasibility of investment for any expansion requests.

New Business: Complete business plan.

Micro Enterprise: Businesses requiring less than \$1,000.00 to start up most provide proof of feasibility, marketability, and pro-forma financial statements.

Business Permit: Three quotes for clients proposed start-up requirements.

I attest that the information given in this application is accurate to the best of my knowledge, and consent / allow the Wikwemikong Development Commission to verify the information given in this application by contacting any or all organizations mentioned in this application. **I also give consent to the above organizations to release any relevant financial information.**

Signature

Date