



Business Planning Worksheet

PROTECTED

Applicant identification

Name(s):		Applicant number:	
Brief personal and/or business background:			
Nature of project (if applicable):			
Total project cost:		Credit facility amount requested:	
Expansion: <input type="checkbox"/> Yes <input type="checkbox"/> No	Start-up: <input type="checkbox"/> Yes <input type="checkbox"/> No	If start-up - new entrant: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Project description and rationale:			

Business profile

General location:	
Primary enterprise description:	
Years in business:	Scale:
Secondary enterprise description:	
Years in business:	Scale:
Previous year:	Primary enterprise sales:
	Secondary enterprise sales:
	Total gross sales:
Facilities: <input type="checkbox"/> Owned <input type="checkbox"/> Leased	
Description of facilities/assets (if leased, include lease terms and prospect for renewal):	

Business structure

<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Incorporated	No. of partners/shareholders:
Details:			
Will business structure change as a result of this project? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, details:			
Management team (who makes decisions?):			
How many persons are employed:			Union: <input type="checkbox"/> Yes <input type="checkbox"/> No
Details:			

Marketing

Product distribution/clientele:

Industry outlook/future strategy:

Financial highlights:

Balance sheet (statement of assets & liabilities) attached: Yes No

Past income & expense statement attached: Yes No

Project income & expense statement attached: Yes No

Cash flow for next 12 months attached (always if start-up): Yes No

Operating credit authorized: Amount:

Financial institution:

Personal & business goals

(How they will be achieved & required capital expenditures. Attach additional information if necessary.)

Short-term plans (1-3 years):

Long-term plans (4-10 years):

**The above planning worksheet is an accurate
representation of the business plans of:**

(complete personal or company name)

Date (YYYY-MM-DD)

Authorized signature