



Date Received by BCFDC/SEDC: _____

Bruce County Emergency Business Sustainability Loan

The Bruce County Emergency Business Sustainability Loan is funded by Bruce County and administered by Bruce Community Futures Development Corporation (BCFDC) and Saugeen Economic Development Corporation (SEDC). BCFDC and SEDC are community based non-profit economic development organizations committed to assisting and encouraging job creation and community economic development throughout the County of Bruce.

More information about the Emergency Business Sustainability Loan can be found at www.bruce.on.ca or www.sbdc.ca.

The Application Process

Applicant submits a completed:

- Bruce County Emergency Business Sustainability Loan Application
- Prior year (2019) and year to date financial statements (in house is fine)
- Documentation is reviewed by BCFDC or SEDC staff for completeness
- When applications are approved by BCFDC/SEDC Board, the Letter of Offer is prepared and sent to loan applicant for signature
- Funds are *normally* made available within three days after the signed Loan Agreement is returned to the BCFDC/SEDC staff.

Costs

- Applicants are responsible for any cost to determine credit worthiness and these costs will be deducted from the loan advance.

Loan Information

- Maximum loan size is \$20,000 for working capital and cash flow
- Generally, loans will be approved based on 3 months working capital requirements
- 2.5% annual interest will be charged
- No principal or interest payments are required for the first six months of the loan
- Starting in the 7th month, payments will be made according to the agreed upon amortization schedule, and the loan can be repaid at any time without penalty
- Personal Guarantee will be taken for security

A: Business Information

Name of Company/Business			
Names of Principles	1	Phone #	
	2	Phone #	
	3	Phone #	
	4	Phone #	
Business Address			
Business Phone		Business Fax	
Business email			
Structure of Business			
Sole Proprietor		Partnership	Incorporation
Type of Business			
Service		Agriculture	Manufacturing
Retail		Tourism	Wholesale
		Other	

B: Loan Information

Monthly Overhead Cost (\$)		
Amount Requested (\$)		
# of Employees (FT/PT) – pre COVID-19:	F/T ____	P/T ____
# of Employee (FT/PT) – currently:	F/T ____	P/T ____

Please complete the following information:			
Based on your fiscal year	Jan-Apr 2020	Jan-Apr 2019	Fiscal Year 2019
Total Revenues from all sources:			
Net Income/Loss:			
Current Assets:			
Current Liabilities:			
Long-Term Assets:			
Long-Term Liabilities:			
Operating Expenses:			
Interest Charges:			

Is your business or organization currently in arrears on any outstanding debt?

YES NO

What will the requested funding be used for?

Please identify your business or organization's total annual operating costs below:	
Utilities:	
Insurance:	
Bank Interest Charges:	
Professional Fees:	
Rent:	
Wages:	
Property Taxes:	
Other:	
Total Costs:	

C: Personal Statement of Affairs

This section must be completed and submitted for EACH principle of the business.

FULL NAME _____ DOB _____ SIN (Optional) _____

RELATIONSHIP TO APPLICANT (Spouse/Shareholder/Guarantor) _____

ADDRESS _____ OWN ____ RENT ____ SINCE ____

TELEPHONE RES. _____ BUS. _____ E-MAIL _____

PREVIOUS ADDRESS (if less than 3 yrs. at above address) _____

MARRIED ____ SINGLE ____ SEPARATED ____ DIVORCED ____ # DEPENDENTS _____

EMPLOYER _____ POSITION _____ SALARY _____ #YRS _____

EMPLOYER'S ADDRESS _____ PHONE _____

OTHER INCOME _____ SOURCE(S) _____

REAL ESTATE

Address and Legal Description	Year Purchased	Price Paid	Mortgages Outstanding	Estimated Current Value

STATEMENT OF NET WORTH

ASSETS	VALUE	LIABILITIES		
			Amount	Monthly Payment
Real Estate 1.				
2.		Loans		
Bank Account				
Investments		Mortgages		
RRSP's				
Automotive: 1. year _____ make _____		Credit Cards		
2. year _____ make _____				
Recreation Equipment		Other Liabilities		
Equity in Business				
Other Assets		NET WORTH		\$
TOTALS	\$		\$	\$

BANK(S) OR CREDIT UNION(S) DEALT WITH _____

E: Other Funding Requests

- Has your business applied for or received any federal or provincial funding related to COVID-19 economic measures?
YES NO
- If yes to above question, select the COVID-19 measure or select other and indicate other program below:

Business Credit Availability Program (BCAP)	<input type="checkbox"/>
Canada Emergency Business Account (CEBA)	<input type="checkbox"/>
Canada Emergency Commercial Rent Assistance (CECRA) (Received by Landlord)	<input type="checkbox"/>
Canada Emergency Wage Subsidy (CEWS)	<input type="checkbox"/>
CRA Temporary 10% Wage Subsidy	<input type="checkbox"/>
Service Canada Work-sharing program	<input type="checkbox"/>
NRC-IRAP Wage Subsidy	<input type="checkbox"/>
Emergency Loans Through CFDCs	<input type="checkbox"/>
Other	<input type="checkbox"/>
If Other, please indicate:	

3. If yes to above question, please indicate the following:

Amount applied for:		Amount received:	
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Status of Funding:	<input type="checkbox"/> To be requested
	<input type="checkbox"/> Requested but not confirmed
	<input type="checkbox"/> Confirmed
	<input type="checkbox"/> Rejected but eligible
	<input type="checkbox"/> Rejected as not applicable

Additional Documents to be Provided

1. [Statement of Personal Liabilities and Assets](#) for any Guarantor
2. Copy of Birth Certificate
3. Copy of Driver's Licence

Disclosure and Release Statement *Important- read thoroughly before signing!*

1. Are you related to any Director or Employee of the Bruce CFDC or SEDC? YES NO
2. Are you a member of County Council or the Council of member municipalities or an employee of the County of Bruce or related to such person? YES NO
3. I, hereby certify that the information in this Statement of Personal Assets and Liabilities is a complete and true declaration. The property values shown above are the fair market values of the properties and the amount of debts is the total potential indebtedness (inclusive of any other loans, credit cards, or other debts for which I have signed as a guarantor).
4. I confirm that if any statement I have made herein or in accompanying materials proves to be incorrect in any way, I shall notify the Corporation immediately.
5. I authorize the Corporation to obtain personal credit information about me from any source. By executing this statement, I acknowledge as notice in writing, the Corporation's intent to obtain this information and I authorize each source to provide this information to the Corporation.
6. I understand and agree that in order to perform a credit investigation, I need not provide my Social Insurance Number ("SIN") if I can provide alternative identification that is acceptable to the credit reporting agencies. If I do provide my SIN, I consent to the Corporation using this information for the limited purpose of performing a credit investigation.
7. I authorize the Corporation to retain this Statement of Personal Assets and Liabilities and any financial records, credit and reference reports for the Corporation's records and reporting to Industry Canada who oversees the Community Futures Program.
8. I confirm receipt of the Corporation's *Privacy Statement* and understand and consent to the Corporation collecting, using, retaining and disclosing the information contained in this Statement of Personal Assets and Liabilities for the limited purpose of determining my eligibility for financing as is required by law, and by FedDev. I understand that the Corporation will handle my personal information in strict confidence in accordance with Federal privacy law as set out in the Corporation's *Privacy Policy*. If I have any questions or concerns about the management of my information, I may refer to the *Privacy Policy*, available at www.bruce.on.ca or contact the Chief Privacy Officer.

Yes or No

I am currently the subject of litigation before a court, tribunal, government board or agency, or there is a threat of such litigation. There are unexecuted judgment(s) registered against me, such as:

_____.

I have made an assignment or have been petitioned into bankruptcy; there are writs registered against my name. If yes, provide details: _____.

I certify that I am a Canadian Citizen or Landed Immigrant.

Date	Print Applicant's Name	Applicant's Signature	Print Witness name	Witness' Signature