Community Futures Nadina

Business Planner

Community Futures Nadina

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Welcome to the Community Futures Nadina Business Plan.

This tool can help your business succeed by assisting you to analyze your business strategy, the market which you operate in, and your financial plan. At the same time, it will help us to better understand your business, your goals, and the role that we can play in helping you achieve them. The process is simple. Either print out the business plan and fill it in by hand, or take advantage of our interactive form and complete the PDF document online. In this case, please ensure that you have carefully read the instructions provided, explaining how to save and reload your document.

Then, when you are finished, either fax, email, or drop it off at our office.

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business profile

1.0

Please describe what your business does and the environment that your business operates in. Along with your business strategy, this will help you, as well as us, gain a better understanding of the factors important to the success of your business. If you require more space, please feel free to attach additional pages.

1.1 YOUR BUSINESS

Details

REGISTERED BUSINESS NAME |

BUSINESS OPERATING NAME |

BUSINESS ADDRESS |

MAILING ADDRESS |

TELEPHONE | FACSIMILE |

CELLULAR |

EMAIL |

WEBSITE |

DATE ESTABLISHED | CURRENT OWNERSHIP SINCE |

Form of business (choose one)

☐ Corporation ☐ Sole proprietorship ☐ Co-operative ☐ Incorporated association

☐ Partnership ☐ Society ☐ Other |

Industry sector (choose one)

☐ Retail ☐ Service ☐ Other |

☐ Manufacturing ☐ Franchise

Current financial institution(s)

Company owners

OWNER 1 % OWNERSHIP

OWNER 2 % OWNERSHIP

OWNER 3 % OWNERSHIP

OWNER 4 % OWNERSHIP

Business involvement ☐ Full-time ☐ Part-time

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Accountant

NAME |

ADDRESS |

TELEPHONE | FACSIMILE |

EMAIL |

FISCAL YEAR END |

Date of most recent formal accountant prepared financial statements or corporate income tax return

Latest interim statements (if applicable)

Lawyers

NAME |

ADDRESS |

TELEPHONE | FACSIMILE |

EMAIL |

1.2 BUSINESS ENVIRONMENT

Product

What is your product or service? How will it be made?

Where will you obtain raw materials?

How will the demand for your product or service evolve or change?

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Will you rely on skilled or un-skilled labour? If skilled, where and how is training and accreditation obtained?

What are the sources of your labour?

Which industry associations have you joined?

Suppliers

Who are your primary suppliers?

1 NAME |

ADDRESS |

2 NAME |

ADDRESS |

3 NAME |

ADDRESS |

4 NAME |

ADDRESS |

Have you negotiated terms with these suppliers?

Industry

Describe the total size of your industry

Potential sales

Number of customers

Describe any trends that affect your industry (e.g. seasonal, government regulations)

Has the industry been growing, declining or steady in recent years?

What factors (global or local) have determined the above?

What is the long-term outlook for your industry?

How will this affect your business?

Market

Describe your target market

Estimate the size of this market (gross sales and units or services sold)

What is your share of that market?

Describe the type of people that are likely to purchase your product or service

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Products and Services

What makes your product or service unique (i.e. your competitive advantage)?

What benefits will your customers gain by purchasing your product or service?

Describe the price structures (mark-ups, commissions, etc.) that are typically used in your industry.

Describe the distribution methods (wholesalers, agents, etc.) that are typically used in your industry.

Provide a brief description of your skills, knowledge or experience in this industry.

Competition

Who are your direct competitors?

What are their strengths and weaknesses? Compare their service or product to yours.

What are your weaknesses?

How do you intend to deal with these weaknesses?

Risk

What risk do you face in producing your product or service?

How do you intend to minimize this risk?

1.3 SALES AND MARKETING

Advertising and Promotion

How will you advertise or promote your product?

Identify the media you will use and the associated costs (choose those that apply)

☐Newspapers $	☐Magazines $	☐Other $
☐Radio $	☐Television $	

Customers and Distribution

How will you distribute your product or service?

How will customers pay for your product or service?

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What terms are you prepared to offer your customers? (e.g., net 30 days)

What is your customer service policy? (e.g., guarantees, warranties, layaway plans, return policies, etc.)

Pricing

What is your pricing strategy?

How did you arrive at this and why?

How is your competition priced?

1.4 OPERATING PLAN

Financing Requirements

How much of your own funds have you invested in your business to date?

What was the source of this investment?

Do you think there will be a need for large further expenditures in the near future?

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Do you need to borrow money? If yes, list the amount.

☐ Yes $ ☐ No

What type of financing do you require?

☐ Operating line of credit/overdraft protection ☐ Equipment loan or lease

☐ Loan for real estate ☐ Credit card(s)

☐ Other |

Location

How much space will your business require?

Have you chosen a location?

☐ Yes ☐ No

What will this space cost?

$

Terms?

☐ *Lease* ☐ *Month-to-month*

What are the advantages/disadvantages of the location that you have chosen?

Has an environmental inspection (e.g. Level I, II, II) been done on the property?

☐ Yes (Please list the firm below.) ☐ No

ENGINEERING FIRM |

ADDRESS |

TELEPHONE | FACSIMILE |

EMAIL |

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Employees

Please list any employees that will be working with you.

1 NAME |

JOB TITLE |

RESPONSIBILITIES |

QUALIFICATIONS |

2 NAME |

JOB TITLE |

RESPONSIBILITIES |

QUALIFICATIONS |

3 NAME |

JOB TITLE |

RESPONSIBILITIES |

QUALIFICATIONS |

4 NAME |

JOB TITLE |

RESPONSIBILITIES |

QUALIFICATIONS |

5 NAME |

JOB TITLE |

RESPONSIBILITIES |

QUALIFICATIONS |

6 NAME |

JOB TITLE |

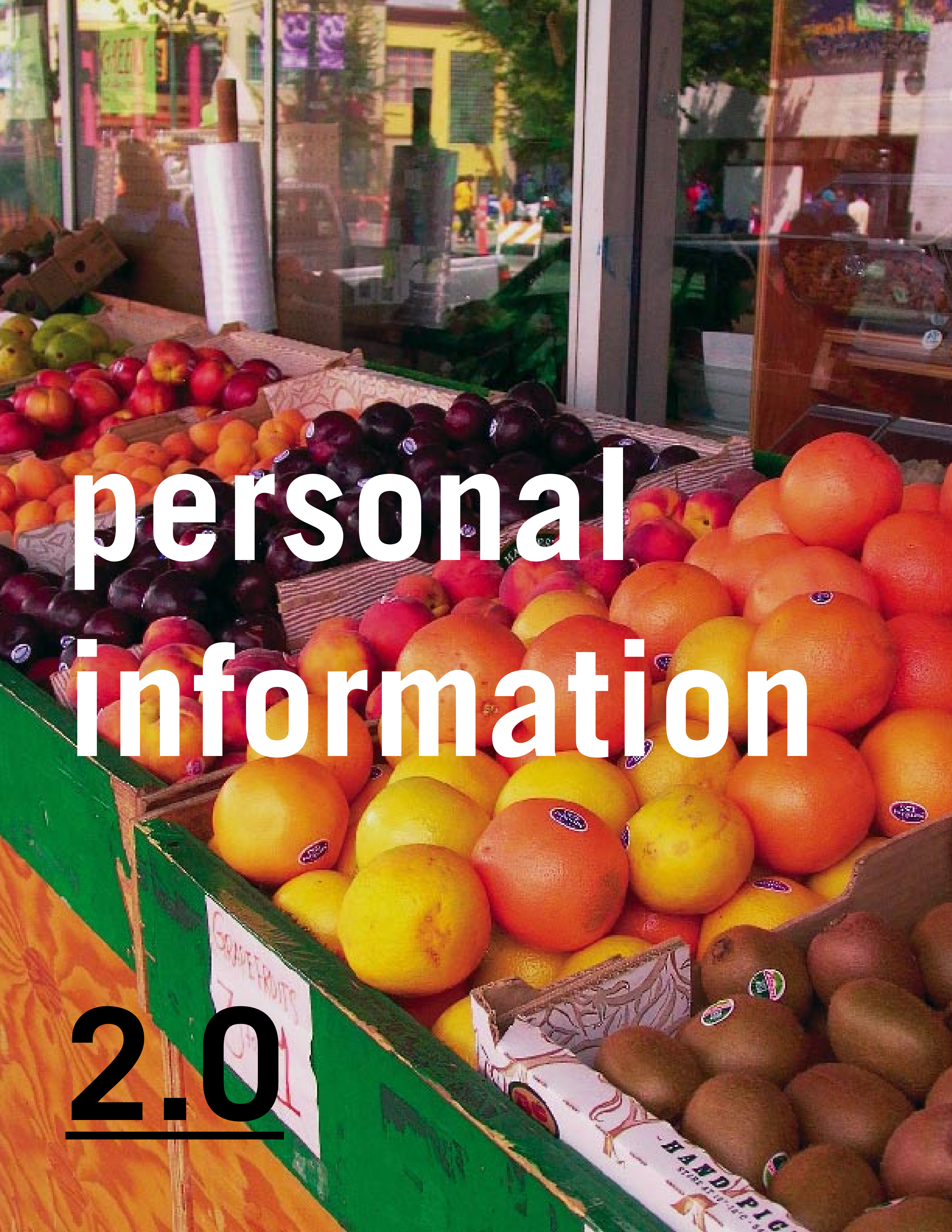
RESPONSIBILITIES |

QUALIFICATIONS |

Do you exepct to hire anyone else in the near future?

☐ Yes ☐ No

personal information 2.0



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Along with you business, it is important to understand your own financial strengths. This will help determine the right strategy to meet your business needs. Please include the value of your spouse's assets in the personal statement below. If there is more then one owner, each applicant must complete section 2.0 Personal Information

Name

Education and qualifications

Applicable skills and/or trades

Employment history

1

2

3

4

Personal reference(s)

1 NAME | TITLE |

COMPANY |

ADDRESS |

TELEPHONE |

2 NAME | TITLE |

COMPANY |

ADDRESS |

TELEPHONE |

3 NAME | TITLE |

COMPANY |

ADDRESS |

TELEPHONE |

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2.1 PERSONAL FINANCIAL STATEMENT

Assets		**Amount**
Cash	$	
Account balances		
RRSPs		
Home		
Other real estate		
Vehicles		
Other assets (specify)		
Total assets	**$**	0.00

Liabilities		**Balance**		**Minimum Monthly Payment**
Home mortgage	$		$	
Mortgage on other real estate				
Personal loans				
Personal line of credit				
Credit cards				
Other (specify)				
Total liabilities	**$**	0.00		
Total monthly liabilities			**$**	0.00
Net worth (total assets - total liabilities)	**$**	0.00		

2.2 DESCRIPTION OF ASSETS, LIABILITIES AND INCOME

Investment portfolio details

1 FINANCIAL INSTITUTION |

HOLDINGS |

2 FINANCIAL INSTITUTION |

HOLDINGS |

3 FINANCIAL INSTITUTION |

HOLDINGS |

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Mortgage details

FINANCIAL INSTITUTION |

BALANCE OUTSTANDING | REPAYMENT TERMS |

MATURITY DATE | CURRENT MARKET VALUE |

ORIGINAL PURCHASE DATE AND PRICE |

REGISTERED OWNERS |

Personal loans and lines of credit

FINANCIAL INSTITUTION |

LIMIT (IF LOC) |

BALANCE OUTSTANDING | REPAYMENT TERMS |

SECURITY HELD |

PURPOSE |

Credit cards held and outstanding balances on each

1 CARD |

LIMIT |

OUTSTANDING BALANCE |

2 CARD |

LIMIT |

OUTSTANDING BALANCE |

3 CARD |

LIMIT |

OUTSTANDING BALANCE |

Have you co-signed or guaranteed any other liabilities?

☐ Yes (Please describe below.) ☐ No

Do you or your spouse receive income from any sources outside of the business?

☐ Yes (Please describe from where and how much below.) ☐ No

Is this income expected to continue?

☐ Yes ☐ No

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Have you ever declared personal bankruptcy?

☐ Yes (Please provide details below.) ☐ No

Are there any outstanding legal actions against you or your spouse?

☐ Yes (Please provide details below.) ☐ No

Are you related to any Community Futures Development Corporation of Nadina Board Members or staff?

☐ Yes (Please provide details below.) ☐ No

Have you sought funding from a financial institution prior to Community Futures Development Corporation of Nadina?

☐ Yes (Please provide details below.) ☐ No

What is the amount of loan funds you are requesting?

What is your intended purpose for the loan funds you are requesting?

Applicant

☐ By checking this box, I ____________________ grant Community Futures Development Corporation of Nadina permission to access my Equifax credit information.

financial plan

3.0

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This section will help you prepare the financial component of your business plan by guiding you through a Business Balance Statement, a Business Income Statement, and a Business Cash Flow Forecast. If you already have financial plans for your business please disregard this section and submit the most current statements separately. If you are starting your business, please fill in only the Cash Flow Forecast section.

3.1 BUSINESS BALANCE STATEMENT

A balance sheet gives you the financial picture of your business at one point in time. It is an indication of your business' assets and liabilities, as well as shareholder equity – i.e. the capital invested into your business.

	Year 20 _____	Year 20 _____	Year 20 _____
ASSETS			
Current Assets			
Cash and equivalent	$	$	$
Accounts receivable			
Inventory			
Prepaid expenses			
Total current assets	**$** 0.00	**$** 0.00	**$** 0.00
Fixed Assets			
Land and building	$	$	$
Equipment			
Minus depreciation			
Total fixed assets	**$** 0.00	**$** 0.00	**$** 0.00
Intangible assets			
Goodwill	$	$	$
Patents			
Other			
Total intangible assets	**$** 0.00	**$** 0.00	**$** 0.00
Total assets	**$** 0.00	**$** 0.00	**$** 0.00

	Year 20 ______	Year 20 ______	Year 20 ______
LIABILITIES & SHAREHOLDER EQUITY			
Current liabilities			
Short-term debt	$	$	$
Accounts payable			
Income taxes payable			
Long-term debt due within one year			
Other			
Total current liabilities	**$** 0.00	**$** 0.00	**$** 0.00
Long-term liabilities			
Long-term debt			
Other liabilities			
Total long-term liabilities	**$** 0.00	**$** 0.00	**$** 0.00
Total liabilities	**$** 0.00	**$** 0.00	**$** 0.00
Shareholder equity			
Cash equity contribution	$	$	$
Authorized stock/share capital			
Retained earnings			
Total shareholders' equity	**$** 0.00	**$** 0.00	**$** 0.00
Total liabilities and shareholder equity	**$** 0.00	**$** 0.00	**$** 0.00

3.2 BUSINESS INCOME STATEMENT

An income statement outlines your revenue, expenses and profits over a defined period. If you are in the process of beginning your business, please estimate these on a quarterly basis. If your business is already established, please attach income statements for the previous three years, or alternatively, fill in the statement below for the past three years.

	Q1 or Year 20 ___	Q2 or Year 20 ___	Q3 or Year 20 ___	Q4 or Year 20 ___	Annual Totals (if applicable)
Sales	$	$	$	$	$
Cost of goods sold					
Gross Profit Margin: Sales - Cost of Goods Sold	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00
Selling expenses	$	$	$	$	$
Office expenses					
Payroll expenses					
Interest expenses					
General expenses					
Total operating expenses	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00
Operating profit: Gross Profit Margin - Total Operating Expense	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00
Taxes payable					
Owner's salary/dividends					
Depreciation					
Other					
Subtotal	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00
Net income: Operating Profit - Subtotal	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00

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3.3 CASH FLOW FORECAST

A cash flow forecast shows your estimated sources of business revenue and your projected business expenses on a monthly basis over the course of one year. If you are starting a new business, please project the following information for the next 12 months.

	Month					
	1	2	3	4	5	6
CASH RECEIPTS						
From:	$	$	$	$	$	$
From:						
From:						
Sub-total cash from sales	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
Loan proceeds	$	$	$	$	$	$
Cash equity contribution						
Other cash received						
Total cash receipts	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
CASH DISBURSEMENTS						
Inventory purchase	$	$	$	$	$	$
Fixed asset purchase (e.g., equipment; leases)						
Production materials						
Rent/Utilities						
Salaries						
Insurance						
Marketing						
Bank interest						
Principal portion of long-term debt						
Service charges						
Taxes						
Other						
Total cash disbursements	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
NET CASH POSITION						
Monthly surplus (or deficit)	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
Cumulative cash flow (or deficit) to date	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00

	Month						
	7	8	9	10	11	12	Total
CASH RECEIPTS							
From:	$	$	$	$	$	$	$ 0.00
From:							0.00
From:							0.00
Sub-total cash from sales	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Loan proceeds							0.00
Cash equity contribution							0.00
Other cash received							0.00
Total cash receipts	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
CASH DISBURSEMENTS							
Inventory purchase	$	$	$	$	$	$	$ 0.00
Fixed asset purchase (e.g. equipment; leases)							0.00
Production materials							0.00
Rent							0.00
Salaries							0.00
Insurance							0.00
Marketing							0.00
Bank interest							0.00
Principal portion of long-term debt							0.00
Service charges							0.00
Taxes							0.00
Other							0.00
Total cash disbursements	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
NET CASH POSITION							
Monthly Surplus (or deficit)	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00
Cumulative cash flow (or deficit) to date	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00	**$** 0.00

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Where do you expect your business to be in one year?

Three years?

Five years?

Applicant 1 Signature

Date

Applicant 2 Signature

Date

Applicant 3 Signature

Date

Applicant 4 Signature

Date

Congratulations!

You have now completed your Business Plan. Please forward to our office by:

- Scanning and emailing to equinlan@cfnadina.ca
- Mailing to Community Futures Nadina, PO Box 236, Houston BC, V0J 1Z0
- Or dropping it off to our office.

We would be happy to meet with you and discuss your business plan needs!