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Email this completed and signed PDF to
 admin@nwtmddf.com for review.

Confidential Application

MDDF Loan EBD Contribution Both

Applicant Information

Legal Name:		<input type="checkbox"/> New	<input type="checkbox"/> Existing
Registered Trade Name:			
Address:			
Community:		Postal Code:	
Phone:		Email:	
Date of Birth (sole proprietor):		Years in Business:	

Type of Business

<input type="checkbox"/> Incorporated (Privately)	<input type="checkbox"/> Incorporated (Band or Community Owned)	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership
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Shareholder/Owner Summary (Total 100%)

Name	Community	Percentage Share

Purpose (Check all applicable and explain)

<input type="checkbox"/> Startup	<input type="checkbox"/> Buying a Business	<input type="checkbox"/> Home-based	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Marketing	<input type="checkbox"/> Expansion	<input type="checkbox"/> Business Plan	

Please explain:

Type of Financing (Check all applicable)

<input type="checkbox"/> Term Loan	<input type="checkbox"/> Working Capital	<input type="checkbox"/> Letter of Credit	<input type="checkbox"/> EBD Contribution	<input type="checkbox"/> IWE Funding
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Ethnicity

<input type="checkbox"/> Dene	<input type="checkbox"/> Métis	<input type="checkbox"/> Inuit	<input type="checkbox"/> Non-Aboriginal
<input type="checkbox"/> Other:			

Supporting Documents

<input type="checkbox"/> Tax Returns/Financial Statements (Past 3 years)	<input type="checkbox"/> Details of major assets (land, buildings, equipment)
<input type="checkbox"/> Marketing Plan	<input type="checkbox"/> Cash flow estimate, monthly year 1, annually years 2 & 3
<input type="checkbox"/> Resume of principals and key management	<input type="checkbox"/> CRA notice of assessment (most recent)
<input type="checkbox"/> Details and firm quotes where applicable	<input type="checkbox"/> List of accounts receivable and payable
<input type="checkbox"/> Business Plan	<input type="checkbox"/> Personal net worth statements (each owner or shareholder)

Please contact the NWT MDDF to see what additional documentation is required based on the type of business and specifics of your application.

How Financing Will Be Used

Business Planning	\$	Marketing	\$
Startup Costs	\$	Working Capital	\$
		Letter of Credit	
Land & Building	\$	Equipment	\$

Where Funds Are Coming From

MDDF Loan	\$	EBD Contribution	\$
Own Resources	\$	Other:	\$
Other:	\$	Other:	\$

Project Benefits

Current Year Ending (DD/MM/YYYY):			
Full-time Jobs Created:		Staff Wages:	\$
Part-time Jobs Created:		Management Wages:	\$
NWT Purchases:		Gross Sales:	\$
Next Year Ending (DD/MM/YYYY):			
Full-time Jobs Created:		Staff Wages:	\$
Part-time Jobs Created:		Management Wages:	\$
NWT Purchases:		Gross Sales:	\$
Other Benefits:			

Declaration of Applicant

The undersigned hereby declare(s) that all the information provided herein and on the accompanying statements is to the best of my/our knowledge true and correct and understand it will be used by MDDF to determine credit worthiness. The proceeds of the loan application will be used for business purposes and not for personal, family or household purposes. The undersigned further consent(s) to MDDF making any inquiries it deems necessary to reach a decision on this application, including but not limited to Credit Reporting Agencies, Canada Revenue Agency, Financial Institutions, Suppliers of Goods and Services, all levels of Government, and consent(s) to the disclosure, at any time, any information about me/us to any Credit Reporting Agency or to anyone with whom I/we have financial relations. Additionally, any information contained in this application may be publicly disclosed in an Annual Report of NWT MDDF, or the Canadian Northern Economic Development Agency; such information may include, but is not limited to, the name and principals of the business, the amount of financing provided, the nature and location of the business, and jobs created/maintained. The undersigned makes this declaration knowing it to be true and of the same force and effect as if made under oath.

Signature:

Title:

Date (DD/MM/YYYY):