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Confidential Application

☐ MDDF Loan ☐ EBD Contribution ☐ Both

Applicant Information

Legal Name: _____ ☐ New ☐ Existing
Registered Trade Name: _____
Address: _____ Community: _____
Postal Code: _____ Phone: (_____) - _____ - _____ Fax: (_____) - _____ - _____
Contact Name: _____ Email: _____
Date of Birth (sole proprietor): _____ Years in Business: _____

Type of Business

- ☐ Incorporated (Privately)
☐ Incorporated (Band or
Community owned)
☐ Sole Proprietor
☐ Partnership

Shareholder/Owner Summary (total 100%)

Name	Community	Percentage Share
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Purpose (check all applicable and explain)

☐ Startup ☐ Buying a Business ☐ Home-based ☐ Maintenance ☐ Marketing ☐ Expansion ☐ Business Plan

Type of Financing (check all applicable)

- ☐ Term Loan ☐ Working Capital ☐ Letter of Credit
☐ EBD Contribution

Ethnicity

- ☐ Dene ☐ Métis ☐ Inuit
☐ Non-aboriginal ☐ 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.

All dates are DD/MM/YYYY.

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:	\$ _____
_____	\$ _____
_____	\$ _____

Project Benefits

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

Other Benefits: _____

Previous MDDF Financing Assistance

Year	Purpose	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

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 MDDE 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)

RESET FORM

PRINT FORM

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