

Box 1405, 4908 50th Street Yellowknife, NT X1A 2P1 867-873-9341 admin@mddf.ca www.mddf.ca

## Confidential Application

☐ MDDF Loan ☐ IWE Program ☐	_	
	☐ New ☐ Existing	
Postal Cod	de:	
s (DD/MM/YYYY):		
Phone:		
Postal Cod	de:	
and or community owned)		
Community	Percentage Share	
ng Expansion Business Plan		

Applicant Information				
Legal Name:		☐ New ☐ Existing		
Registered Business Name:				
Address:	Postal Code:			
Phone: Email:				
Contact Name:	Email:			
Date of Birth (DD/MM/YYYY):	Years in Business (DD/MM/YYYY):			
Family Member Name:	Phone:			
Address:	Postal Code:			
Type of Business				
Sole Proprietor Partnership Incorporated (privately)	☐ Incorporated (band or community owned	)		
Shareholder/Owner Summary (total 100%)				
Name	Community	Percentage Share		
Purpose (check all applicable)				
Startup Buying a Business Home-based Mainte	enance Marketing Expansion E	Business Plan		
Please Explain:				
Ethnicity				
☐ Dene ☐ Métis ☐ Inuit ☐ Other:				

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<b>How Financing Will be</b>	ow Financing Will be Used Where Funds are Coming From		
Business Planning	\$	MDDF Loan	\$
Marketing	\$	EBD Contribution	\$
Startup Costs	\$	Own Resources	\$
Working Capital/Letter of Credit	\$	Other :	\$
Land and Building	\$	Other :	\$
Equipment	\$	Other :	\$
	Total \$		Total \$
Project Benefits			
Current Year Ending (DD/MM/YY	YY)	Next Year Ending (DD/MM/YYY	Y)
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 Finance	ial Assistance		
Year		Purpose	Amount
			<b>\$</b>
			<b>\$</b>
			<b>\$</b>
our knowledge true and correct,	and understand it will be use	ovided herein and on the accompanying d by MDDF to determine credit worthing sonal, family, or household purposes.	-
but not limited to Credit Reporting	g Agencies, Canada Revenue o the disclosure, at any time,	uiries it deems necessary to reach a de- e Agency, Financial Institutions, Supplie any information about me/us to any Cr	ers of Goods and Services, all levels
Economic Development Agency;	such information may include and location of the business.	be publicly disclosed in an MDDF Annue, but is not limited to, the name and property, and jobs created/maintained. The undergade under oath.	incipals of the business, the amount
X			
Signature			Date (DD/MM/YYYY)
Personal Statement of	Financial Affairs		
		ly and attach to Application Form.	
		Surname:	
		Date of Birth (DD/MM/YYYY): _	
Home Address:			Postal Code:
Phone:	Fmail:		

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Personal Statement of Financi	al Affairs (	continued)					
Rent Own Home Other:				Occupancy (years):			
Current Employer:		Job Positio	n:				
Spouse's First Name:		Martial Status: Spouse's Surname:					
							Spouse's B
		Primary Bank:					
Personal Net Worth Statement							
List All Assets (what you own)		List All Liab	oilities (what	you owe)			
Cash and Savings	\$	Mortgage -	- First		\$		
Term Deposits/GIC	\$	Mortgage -	- Second		\$		
Stocks/Bonds/Mutual Funds	\$	Bank – Line	es of Credit		\$		
RRSP/Company Pension	\$	Overdraft			\$		
Real Estate – Residence	\$	Bank – Per	Bank – Personal Loans		\$		
Real Estate – Other	\$	Credit Card	Credit Cards		\$		
Automobiles	\$	Private Loa	Private Loans		\$		
Recreational Vehicles	\$	Loans – Co	Loans – Co-signed or Guaranteed		\$		
Other:	\$	Other :	Other :		\$		
Other:	\$	Other :	Other :		\$		
Other:	\$	Other :			\$		
Other:	\$	Other :			\$		
Other:	\$	Other :			\$		
Total Assets	\$			Total Liabilities	\$		
			•	ersonal Net Worth	\$		
			(A336	tis iviirius Liabilities)	Ψ		
Detailed Description of Assets							
1							
2							
3							
Detailed Description of Liabilit	ies						
Describe your Loans, Credit Lines, Credit C	Cards, and Loan	s you have co-signed	or guarante	ed for others.			
Debt Description Ler	der/Creditor	Telephone	Credit Li	mit Balance	Security		
1			\$	\$	Yes No		
2			\$	\$	Yes No		
3			\$	\$	Yes No		

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General Information			
Have you ever had an asset repossessed by a creditor?		Yes No	
If yes, explain:			
Are you involved in any lawsuits that could affect your financial situal If so, explain:	tion?	☐ Yes ☐ No	
Have you ever declared bankruptcy?	s, when? (DD/MM/YYYY)		
Are you discharged?	s, when? (DD/MM/YYYY)		
Do you have any outstanding liability to the Government of the North Compensation Commission, or Canada Revenue Agency?	Yes No		
Are you a shareholder, director or stakeholder of any other business If so, describe the nature of your involvement and/or interest:	p, etc? Yes No		
Declaration of Applicant			
The undersigned hereby declares that all information provided herei I understand that the information contained herein will be used by th MDDF financing eligibility. I further consent to the MDDF making any and to the disclosure of any credit information about me, to any credit innancial relationship.	e NWT Métis Dene Development Fund r credit and general inquiries necessary	Ltd (MDDF) to determine in relation to this application	
X			
Signature Title	e D	ate (DD/MM/YYYY)	
Supporting Documents Required			
Personal	Business		
MDDF Application and Personal Net Worth	License		
☐ Drivers License	Registration		
Status Card	Business Plan		
Canada Revenue Agency – Notice of Assessment	Financial Statements/Projections (3 years)		
(last 2 years)	Resumes of Principals and Key Management		
	Three Quotations/Estimates		
	Proof of 10% Equity		
	CRA Deductions of Source (last tw		
	List of Account Receivables and Pa	ayables	

Applicant file review will commence once all information is received.