

# **PASQUA FIRST NATION #79**

## ECONOMIC DEVELOPMENT DEPARTMENT

## SMALL BUSINESS ASSISTANCE PROGRAMS

## **CONTENTS**

FORWARD	3
New Company Start-up Program	
Application Process Requirements/Assessment Criteria	
Contribution Limits	
Existing Business Assistance Program	6
Application Process Requirements/Assessment Criteria	
Contribution Limits	6
Business Expansion Program	7
Application Process Requirements/Assessment Criteria	7
Contribution Limits	7
PFN Small Business Assistance Program Application Form	3.

#### **FORWARD**

The Nation is committed to the enhancement of self-reliance and the economic well-being of its members - through entrepreneurship and business development - encouraging members to undertake opportunities in all areas of business though the Small Business Assistance Programs.

The Small Business Assistance Programs may be amended from time to time, by the Economic Development Committee and Chief & Council. Notice of amendments will be provided to members before they take effect. The length of the notice will be at the discretion of the Economic Development Committee and Chief & Council and will depend on the nature and extent of the amendment(s).

Developing a successful business is extremely challenging. In order to increase the probability of success, the Nation will assist entrepreneurs in the development of their businesses by providing training and orientation in the areas of opportunity identification, business planning, financial management, marketing & market research.

The Small Business Assistance Programs will provide financial support to individual business enterprises/activities to assist with the purchase of supplies or other costs related to the start-up, and/or operation of the business and to assist with accessing finance/business loans (where applicable).

Program applications must be submitted in writing to the Economic Development Committee.

This program applies solely to the Pasqua First Nation citizens. Members must provide proof that s/he has been a registered member for a minimum of six (6) consecutive months.

Recognizing that members will be considering opportunities in many different areas and recognizing each applicant will have different experiences, skills, equipment, financial strength and support, the following programs have been created:

- New Company Start-up Program
- > Existing Business Assistance Program
- Business Expansion Program

Each program has specific criteria, but all will operate under the following shared eligibility criteria:

- Applicants must be a Pasqua First Nation Band member.
- Members must provide proof that s/he has been a registered band member for a minimum of six (6)consecutive months prior to the submission of their application.
- Members must not owe any money to the Pasqua First Nation.
- A person is eligible to apply to only one (1) program per year.
- ➤ All repeat applications must include information of the outcome of the previous grant funding provided.
- ➤ The Chief and Councillors are not eligible to receive any program financial assistance during their term of office and 3 months after leaving their term of office

3 | Page

# NOTE. Employees, Councillors and the Chief are welcome to attend any business information/training classes, workshops or seminars.

All applications must include a business plan with cash flow projections and identify personal contributions towards the business. An explanation as to how a person is qualified to operate the proposed new or existing business. (i.e., years of experience working in the industry or have the required skill and knowledge acquired through apprenticeship or schooling)

Members receiving Social Assistance are eligible to apply to the programs. They should note that they might not qualify for full Social Assistance once their application has been approved. A subsidy may be paid if they qualify after completing the proper paper work within the social services department and after exploring other options that may be available through other programs.

4 | Page

#### **New Company Start-up Program**

#### **Application Process Requirements/Assessment Criteria:**

- Completed application form or business plan (see attached);
- Paragraph explaining a vision of the proposed business, explaining how it will work;
- Evidence of skill and/or knowledge of the business/industry (such as any licences or trades certifications related to the new business);
- Identification of personal assets which will be contributed to the enterprise equipment (chain saw, skidoo, etc.), vehicles, livestock, etc.;
- Where applicable, explanation of personal & sweat equity which will be invested (the
  value of the work you will do in order to start the business that you would otherwise have
  to pay for such as repairing a vehicle that will be used for the business);
- The amount of equity (your cash investment) that you will be contributing to your new enterprise.

#### **Contribution Limits**

The New Company Start-up program can cover up to 100% of eligible project costs, up to a limit of \$2,500 per applicant.

5 | Page

#### **Existing Business Assistance Program**

It is the desire of the Pasqua First Nation that all member- owned businesses succeed. Successful businesses generate wealth and create employment, both which enhances the Nation economically.

To assist existing businesses which have a need for funds to cover costs to continue to operate or repair or replace equipment, a non-repayable grant is available.

The grant is up to a maximum of 20% of the capital or non-capital costs to a maximum of five thousand dollars (\$5,000). See chart below.

Applicants must make a personal contribution of a minimum of 10% equity towards their project.

#### **Application Process Requirements/Assessment Criteria:**

All applicants will need to submit a business plan, including a cash flow statement showing the estimated income and expenses for three (3) years.

To determine past business performance, historic financial information must accompany the application.

#### **Contribution Limits**

Allowable contribution is 20% of the requested amount to a maximum of \$5,000, as per the following table:

Requested Amount	Allowable Contribution
\$1,000	\$200
\$2,000	\$400
\$3,000	\$600
\$4,000	\$800
\$5,000	\$1,000
\$15,000	\$3,000
\$20,000	\$4,000
\$25,000	\$5,000

#### **Business Expansion Program**

Successful businesses usually expand, employing even more people. To assist businesses which have demonstrated solid management and a reasonable degree of success, over the last three (3) years and which are planning to expand, a non-repayable grant is available.

The grant is up to a maximum of 20% of the capital or non-capital costs to a maximum of five thousand dollars (\$5,000). See chart below.

Applicants must make a personal contribution of a minimum of 10% equity towards their project.

#### **Application Process Requirements/Assessment Criteria:**

All applicants will need to submit a business plan, including a forecasted cash flow statement showing the estimated income and expenses for next three (3) years of operations.

To determine past business performance, historic financial information must accompany the application.

#### **Contribution Limits**

Allowable contribution is 20% of the requested amount to a maximum of \$5,000, as per the following table:

Requested Amount	Allowable Contribution
\$1,000	\$200
\$2,000	\$400
\$3,000	\$600
\$4,000	\$800
\$5,000	\$1,000
\$15,000	\$3,000
\$20,000	\$4,000
\$25,000	\$5,000

### PFN SMALL BUSINESS ASSISTANCE PROGRAMS **APPLICATION FORM Applicant Information** Name: Band #: Phone Number: Current address: E-mail: Unit# Length of time of living on reserve/on-reserve residence: SPOUSE INFORMATION (only for new start up enterprises that will be jointly-owned) Name: Band #: Phone Number Current address: E-mail: Unit# Length of time of living on reserve/on-reserve residence: Work experience related to the proposed enterprise: How long were you employed: **Employment Position:** Duties/responsibilities: **Employment Position:** How long were you employed: Duties/responsibilities: **Employment Position:** How long were you employed: Duties/responsibilities:

# PFN SMALL BUSINESS ASSISTANCE PROGRAMS APPLICATION FORM

New Busin	ess Information						
Type of Business/ Industry Sector:							
One-Time Start-Up Costs & Sources of Funds (equipment, furniture, etc.):							
Item		Estimated Cost		Sources of Funds	Amount		
				Cash Equity			
				SCFN SBP			
				Funding Assistance			
				Requested			
				Financing			
				Other			
Total Estimated Costs				Total Sources of Funds			
<b>Equity Con</b>	tribution to New Co	mpany					
Personal do	ollar contribution curre	ntly avai	lable to contribute	to the new com	pany:		
Equipment that will be used in the operation of the company (list year, make, model and purchase price):							
Year	Make		Model		Purchase Price		
Economic Development Department Workshop attended							
Business Id	ea Feasibility Analysis	s:	Yes		No		
Marketing/Market Research:			Yes		No		
Business Idea Feasibility Analysis:		s:	Yes		No		
Financial Management –							
bookkeeping, invoicing training,			Yes		No		
budgeting Other training	na workehone attondo	۷٠					
Other training workshops attended:  Preliminary Financial Projections							
		115		Don Manth	Dor Voca		
Estimated	kevenues:			Per Month	Per Year		

PFN SMALL BUSINESS ASSISTAN APPLICATION FOR		PROG	RAMS
Total Estimated Revenues:			
Projected Expenses:	Per	Month	Per Year
Total Estimated Expenses:			
	I		1
Signatures			
I authorize the verification of the information provided on this employment. I have received a copy of this application.	s forn	n as to my c	redit and
Signature of applicant:		Date	
Signature of spouse (only if for a jointly owned company	y):	Date	