

APPLICATION

APPLICANT

Address:

Company Name:

Contact Person: Phone: Email:		
Date:		
Each applicant must submit a busir requested.	ness plan/application for e	each business for which assistance is
I. <u>Description of Proposed Pr</u>	roject and use of Pembina	County Job Development Authority Funds.
II. <u>Total Project Funding</u>		
Sources	Amount	Use

PCJDA Application 1

III.	Descrip	escription/Introduction of the Business	
	A.	Legal name and structure of business:	
	В.	Location:	
	C.	Principal owner(s):	
	D.	How the business was originally conceived, history of business, and business goals.	
IV.	Produc	duct(s) and Service(s) Offered	
	A.	Describe what product(s) or service(s) offered.	
	В.	How will Job Development Authority funds enhance the business?	
V.	Need fo	I for Job Development Authority Funds	
	A.	Why are Job Development Authority Funds needed?	
	В.	Efforts to obtain other funds.	

Financial Plan

A.

VI.

PCJDA Application 2

Where are the funds for the project coming from (ex. banks, JDA, other sources)

	 need a commitment letter from the bank need other source of funding from other financial establishment (bank) 		
В.	Uses of funds. How much is going for equipment, operating, etc.		
C.	Projections - provide a 3 year projection		
Market	<u>Analysis</u>		
A.	What is the market for your services - provide proof.		
Marketing Strategies			
A.	How are you going to market your product?		
Operati A.	ion Plan Explain how your business operates product flow etc.		
Management & Personnel Staff			
A.	Identify the management staff.		

C.

В.

Identify jobs to be created.

VII.

VIII.

IX.

Χ.

PCJDA Application 3