

Support Loan Application

Business Information

Non-profit Organization: _____

Social Enterprise: _____ Telephone Number: _____

Incorporation Number (If obtained) _____

Legal name of Social Enterprise is/will be _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Business Telephone: _____ Business Fax: _____

Email: _____

Website: _____

Will this Social Enterprise be a start-up? Yes No

Is this an existing business? Yes No

This organization has been operating full-time/part-time since _____

How many paid staff do you employ? _____ Full-time _____ Part-time

This Social Enterprise will be operating in the primary sector of (check one):

- | | |
|----------------------------------|--|
| <input type="checkbox"/> Craft | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Service | <input type="checkbox"/> Health & Wellness |
| <input type="checkbox"/> Food | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Environment |
| <input type="checkbox"/> Tourism | <input type="checkbox"/> Other: _____ |

How many volunteers do you have? _____

Your Mission and Work

Please give a brief summary of your organization's mission and objectives:

Please select your main beneficiary group from the list below: *(check one)*:

- | | | |
|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Children | <input type="checkbox"/> Young People | <input type="checkbox"/> Women |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Environment | <input type="checkbox"/> General Public |
| <input type="checkbox"/> Homelessness | <input type="checkbox"/> Addiction | <input type="checkbox"/> Disability/Health |
| <input type="checkbox"/> Other: _____ | | |

What are the changes and/or benefits resulting from your organization's work?

How do you measure these changes and/or benefits?

Financial Requirements

This business requires \$ _____ for its proposed project.

The purpose of the loan is for: Start-up Expansion Maintenance

<u>Use of Funds:</u>		<u>Financing</u>	
Equipment		Personal	
Marketing		MBO	
Legal		Bank	
Operations		ACOA	
Working Capital		Other	
Other		Other	
<u>Total:</u>			

APPLICATION MUST BE SIGNED BEFORE IT CAN BE PROCESSED.

The foregoing information is submitted for the purpose of establishing or maintaining credit with MBO and is a true, full and correct statement of our financial condition on the date shown. We hereby authorize MBO to obtain any information it deems necessary about me, including but not confined to, reports from credit bureaus, retail credit companies, or any other source that the CBDC deems appropriate.

We, the undersigned, declare that the statements made herein are for the purpose of obtaining business financing and are to the best of our knowledge complete and correct.

_____	_____	_____
Authorized Signature	Authorized Name (Print)	Date
_____	_____	_____
Authorized Signature	Authorized Name (Print)	Date
_____	_____	_____
Witness' Signature	Witness' Name (Print)	Date

The Final Step

Documentation and information required to complete your application

When you complete your application, please include the information from the list below.

- Business Plan** including financial projections
- Application for Financing**
- Copy of the Articles of Incorporation and By-laws**, or equivalent.
- Financial Statements** for the last two years (if available).
- Key Staff, Trustees and Directors Details** (including the length of service and background skills/experience).
- Current Board of Director Listing**
- Copy of the Board Motion** (authorizing the request for borrowing)
- Copy of Board Meeting Minutes** (for last 3 meetings)
- Bank statements** (3 months for all accounts held)
- Resume of Employee Management/Executive Director**
- Property details**, (if available/applicable)
- Evidence of Legal Structure** (incorporation certificate)

Declaration

I certify that the information supplied with this application is correct to the best of my knowledge.

Full name:

Signature:

Position within organization:

Date:

MBO data protection policy and communications

The information supplied on this form will be used for the purposes of processing your loan application. It will be stored and utilised in accordance with the privacy legislation and MBO policy.

MBO has a policy of full transparency regarding loans and use of funds. Following a successful loan application, we potentially may list your organisation, the work it does and the nature of the loan on our website and in printed material. We may also wish to use your organisation as an example of excellence in social enterprise activity in our communications material.