(COVID-19)

## **REGIONAL RELIEF AND** RECOVERY FUND COMMUNITY FUTURES SUPPORTING RURAL COMMUNITIES





Government Gouvernement

Canadä



330 West St, Unit 10, Brantford, N3R 7V5 Tel: (519) 752-4636 Email: info@enterprisebrant.com www.enterprisebrant.com

# Regional Relief and Recovery Fund Loan Application

Enterprise Brant is a community based non-profit economic development organization. We are committed to assisting and encouraging job creation and community economic development throughout Brant County.

We are governed by a volunteer Board of Directors comprised of skilled professionals drawn from the local community. The directors and staff are dedicated to facilitating entrepreneurial development and the creation of local business initiatives.

What follows is the procedure and application necessary to apply for an Enterprise Brant Regional Relief and Recovery Loan.

#### **Loan Terms**

Loan amounts from \$2,500 To \$40,000

Fixed interest rate of 0% to December 31st, 2022

No payments required until December 31st, 2022

Fixed interest rate of 5% from January 1<sup>st</sup>, 2023 to December 31<sup>st</sup>, 2025

Repayable anytime in part or in full without penalty

Must be repaid by December 31st, 2025

25% can be forgiven provided the full loan is repaid by December 31<sup>st</sup>, 2022

Applications will be accepted until the fund is depleted

Please return you completed application by email or drop it off in our mail slot at 330 West St. Unit 10, Brantford.

#### **The Application Process**

Submit your <u>completed</u> loan package to info@enterprisebrant.com.

#### **Documentation Required Where Applicable**

- Client Information Form and Waiver of Liability – must be completed in order to work with a consultant
- 2. Description of your business, the COVID 19 impact on your business, and how you will use this additional funding
- **3. Identification** two copies of government identification- one must include a current photo-Health Cards are not acceptable

#### 4. Taxation

- Personal CRA Notice of Assessment for 2018 or 2019 as applicable
- Corporate Notice of Assessment
- Current Statement of Government Remittances

#### 5. Existing Business

- Annual Financial Statements Most recent accountant prepared financial statements
- Interim/internal financial statements to Feb 29, 2020
- Sole Proprietorship/Partnership copy of your Master Business License
- Corporation Certificate and Articles of Incorporation
- 6. Completed Personal Financial Statement
- 7. Signed and Completed Loan Application

Once we have all your documents, credit and reference checks will be completed and information requiring clarification will be discussed. Additional information may be required once the initial review of your application is completed.

#### Criteria for Loan Consideration

Specific financing criteria must be met including:

- Loan amounts from \$2500 to \$40,000 to assist with the hardships/recovery of the COVID 19 pandemic
- The business must be based in Brant/Brantford.
- > Reasonable personal financial investment
- Demonstrated business viability before March
   2020

#### **Approved Applications**

Upon approval, we will prepare an Offer to Finance and loan documents that you must sign and return within a prescribed period of time.

#### **Loan Information**

Some general guidelines:

- For working /recovery capital during the COVID 19 pandemic
- Ongoing business consulting
- Help from consultants to guide you toward complete submission of your application

#### **Outcomes**

There will be only one of two outcomes from the Loan Committee:

- 1. Approved as presented: application approved
- 2. **Declined**: application declined- you will be advised by email with an explanation and will have the opportunity to address any concerns and resubmit your application

#### **Services Provided by Enterprise Brant**

In addition to business loans, Enterprise Brant offers:

- Business Plan Review
- Business Consulting
- Community Development Support

#### **Privacy Policy**

Our privacy policy is available on our website or, if you prefer a paper copy one can be provided for you.

#### **Contact Info and Resources**

#### **Enterprise Brant**

330 West St. Unit 10 Brantford Ontario, N3R 7V5

Phone: 519 752-4636

Email: <a href="mailto:info@enterprisebrant.com">info@enterprisebrant.com</a>
Web: <a href="mailto:www.enterprisebrant.com">www.enterprisebrant.com</a>

#### PERSONAL FINANCIAL STATEMENT

| First Name:  |               |  | Last Name:  |  |            |  |
|--|---------------|--|---|--|------------|--|
| Address:   |               |  | City:   |  |            |  |
| Postal code:   |               |  | At this address since:<br>MM/YY                                 |  |            |  |
| Own or Rent:   |               |  | Previous Address:<br>If less than 2 years at<br>current address |  |            |  |
| Home Tel/Cell:   |               |  | Marital Status:   |  |            |  |
| Date of Birth:<br>MM/DD/YY   |               |  | Number of Dependents:   |  |            |  |
| Social Insurance<br>Number:  |               |  | Email:  |  |            |  |
| Employer & employer's address:   |               |  | Length of employment with current employer:                     |  |            |  |
| Spouse's full name:  |               |  | Spouse's Date of Birth:<br>MM/DD/YY                             |  |            |  |
| Spouse's Social<br>Insurance Number:   |               |  | Spouse's occupation:  |  |            |  |
| Spouse's employer & employer's address:  |               |  | Spouse's length of employment with current employer:            |  |            |  |
| OTHER INFORMATION:   |               |  |   |  |            |  |
| Are you party to any claims or lawsuits? Yes \( \subseteq \text{No} \subseteq \)   |               |  | Do you owe any taxes in this ye                                 |  | Yes 🗌 No 🗌 |  |
|  |               |  |   |  | Yes No No  |  |
| If you answered YES to any of the above questions provide or attach a detailed explanation.                                      |               |  |   |  |            |  |
| DISCLOSURE AND RELE  | ASE STATEMENT |  |   |  |            |  |
| Γo: Enterprise Brant   |               |  |   |  |            |  |
| I/We certify the statement of my property and debts, including information contained in the appropriate schedules, are true.     |               |  |   |  |            |  |
| I/We declare that neither my spouse nor any other person has any claim in, or to the assets shown except as set out therein. The |               |  |   |  |            |  |
| whole of my/our property is shown at a fair valuation. I am not being sued and there are no executions against me, nor do I owe  |               |  |   |  |            |  |

anything except what is reported.

I/We hereby authorize Enterprise Brant to, at any time, investigate and obtain factual information regarding me/us from any credit bureau, chartered bank, or any other person in connection with advisory, consultative, administrative or financing services as permitted by law, to furnish other consumer credit grantors and credit bureaus with particulars of the credit application and subsequent credit experience, if applicable, and to retain this application for the Enterprise Brant records.

I/We acknowledge that government funders, including, but not limited to, the Federal Economic Development Agency of Southern Ontario and the Ministry of Training Colleges & Universities, or their successor(s), may have access to the records of the business at any time.

| Statement, information and consent must be completed, signed, and witnessed before the application can be processed. |                      |       |                       |                    |  |  |  |
|--|----------------------|-------|-----------------------|--------------------|--|--|--|
| Applicant name: (print)  | Applicant signature: | Date: | Witness name: (print) | Witness signature: |  |  |  |
| 1)   |                      |       |                       |                    |  |  |  |
| 2)   |                      |       |                       |                    |  |  |  |

NOTE: This information must be submitted for each of the principals of the business in partnerships or incorporations. Witness cannot be an employee or family member.

|   |  | Name:  |   |                |         |
|---|--|--|---|----------------|---------|
| ASSETS (own)  | INSTITUTION                            |  |   |                | AMOUNT  |
| CASH  |  |  |   |                | \$      |
| RRSP's (self)   |  |  |   |                | \$      |
| RRSP's (spouse)   |  |  |   |                | \$      |
| Stocks, Bonds, Mutual<br>Funds                                | Describe                               |  |   |                | \$      |
| Real Estate Property (1)                                      |  | ear purchased & nased – Date appraised                 |   |                | \$      |
| Real Estate Property (2)                                      | Address – Ye                           | ear purchased & nased – Date appraised                 |   |                | \$      |
| Vehicle (1)   | Year, make, i                          |  |   |                | \$      |
| Vehicle (2)   | Year, make, 1                          | nodel  |   |                | \$      |
| Other assets  | Description                            |  |   |                | \$      |
|   |  |  | TOT ()  | AL ASSETS      | \$      |
| LIABILITIES (owe)   |  | ı  | NSTITUTION  |                | AMOUNT  |
| Personal Loans or LOC   | Bank, address                          |  |   |                | \$      |
| Mortgage (1)  | · ·                                    | ress, mortgage   |   |                | \$      |
| Mortgage (2)  |  | ress, mortgage   |   |                | \$      |
| Vehicle Loan or Lease (1)                                     |  | ank, term of lease or                                  |   |                | \$      |
| Vehicle Loan or Lease (2)                                     | Motor co., Bank, term of lease or loan |  |   |                | \$      |
| Credit Cards Visa & M/C                                       | List cards:                            |  |   |                | \$      |
| Credit Cards (other)  | List company names:                    |  |   |                | \$      |
| Other   | Description                            |  |   |                | \$      |
|   |  |  | 2 TOTAL L   | IABILITIES     | \$      |
|   | Calcul                                 | ate – Your Net Worth                                   | = ① - ② (Total Assets minus Total   | Liabilities) = | \$      |
|   | STATEMEN                               | NT OF INCOME A   | ND EXPENDITURES (ANNUA  | LLY)           |         |
| INCOME  |  | ANNUALLY   | EXPENDITURES  | MONTHLY        | ANNUALL |
| Salaries, Wages - (self-befor                                 | re taxes)                              | \$   | Mortgage / Rent / Property tax  | \$             | \$      |
| Salaries, Wages - (spouse-bo                                  | efore taxes)                           | \$   | Taxes, CPP, EI, etc.  | \$             | \$      |
| Rental Income   |  | \$   | <b>Total Loan Payments</b>  | \$             | \$      |
| Other Income: EI, CPP, etc                                    | c <b>.</b>                             | \$   | <b>Total Credit Card Payments</b>   | \$             | \$      |
| Income from Self Employment                                   |  | \$   | Other: child/ spousal support, etc.   |                |         |
| Other:<br>child support, child tax benefit,<br>pensions, etc. |  | \$   | Estimated Living Expenses:<br>Utilities, food, recreation, gas,<br>daycare, medical, telephone,<br>cable, insurance | \$             | \$      |
|   | L INCOME                               | \$   | <b>© TOTAL EXPENDITURES</b>   | \$             | \$      |
| Calculate – Your Disposabl                                    | e Annual Inco                          | ome = $\mathfrak{D} - \mathfrak{D} = (\text{Total } )$ | Annual Income minus Total Annua   | l Expenditures | \$      |
|   |  |  |   |                |         |
| Signature   |  |  | Date  |                | _       |

#### **APPLICATION FOR FINANCING**

| Loan                    | Informatio    | n         | Rı                | ısiness Inform  | ation       |     |
|-------------------------|---------------|-----------|-------------------|-----------------|-------------|-----|
| Projected COVID 1       |               |           | Operating Nar     |                 | 401011      |     |
| Impac                   |               |           | Legal Nar         |                 |             |     |
| Loan Requeste           |               |           | Business          |                 |             |     |
| •                       |               |           | Business Y        |                 |             |     |
| Use of Fund             | ls (provide   | details)  |                   | nd:             |             |     |
|                         | \$            |           |                   |                 |             |     |
|                         | \$            |           | Compa             | ny Owners or    | Directors   |     |
|                         | \$            |           | Nan               | ne              | Phone       |     |
|                         | \$            |           |                   |                 |             |     |
| (Specif                 | y)            |           |                   |                 |             |     |
| Details:                |               |           |                   |                 |             |     |
|                         |               |           | Address a         | and Location    | information | 1   |
| Sources of Funds (I     |               |           | Street Address    | :               |             |     |
| Source                  |               | Amount    | Address 2         | :               |             |     |
|                         |               |           | City              | :               |             |     |
|                         |               |           | Postal Code       |                 |             |     |
|                         |               |           | Phone             | :               | Fax:        |     |
|                         |               |           | Email Address     | :               |             |     |
|                         | - U.T.        | 5         | Web Address       | :               |             |     |
| Employment              | Full Time     | Part Time | C                 |                 | •           |     |
| Jobs Created:           |               |           | Proprietorship St | Partnership     | Corporation | 'n  |
| Jobs Maintained:        |               |           | Proprietorship    | Partileisilip   | Corporatio  | ווע |
| Seasonal:               |               |           | Bank              | x/Credit Infor  | mation      |     |
|                         |               |           | Name              | of Financial In | stitution   |     |
| Duringas                | Inguiron on D | -4-:1-    | Business:         |                 |             |     |
|                         | Insurance D   | etaiis    | Location:         |                 |             |     |
| Company                 |               |           | Contact:          |                 |             |     |
| Policy Number<br>Amount | \$            |           | Phone:            |                 |             |     |
| Amount                  | <del>y</del>  |           | What Bookkeep     | oing System do  | you use?    |     |
|                         |               |           | Who is your Ac    | countant?       |             |     |
|                         |               |           | Who is your Lav   | wyer?           |             |     |
|                         |               |           | TTO IS YOU! Lat   | ,               |             |     |
| Signature               |               |           | <br>Date          |                 |             |     |
| Signature               |               |           | Date              |                 |             |     |

#### **Business Assets and Loan Security Offered**

List below the collateral you propose to offer towards the loan. If applicable, indicate the fair market value of the assets. Examples of security would include assignment of receivables, inventory, business assets (including machinery and equipment), personal assets, property, and loan guarantees.

| Assets (indicate make, model, year, serial number etc. if applicable) | Est. Values | Loan Balance |
|---|-------------|--------------|
|   | \$          |              |
|   | \$          |              |
|   | \$          |              |
|   | \$          |              |
|   | \$          |              |

#### **Insurance Requirements for COVID 19 Relief Financing**

An assignment of business insurance will be required and will form part of the loan security.

| Environmental Compliance  |                          |  |  |  |  |
|---|--------------------------|--|--|--|--|
|   |                          |  |  |  |  |
|   |                          |  |  |  |  |
|   |                          |  |  |  |  |
|   |                          |  |  |  |  |
|   |                          |  |  |  |  |
| Lending institutions often have strict requirements when lending / granting funds to companies whose activities have an impact on the environment. You will want to develop your own code of conduct; determine criteria to follow and establish 'what if' scenarios. |                          |  |  |  |  |
| View this site:   | http://www.ene.gov.on.ca |  |  |  |  |
|   |                          |  |  |  |  |
| Signature   | Date                     |  |  |  |  |
|   |                          |  |  |  |  |

### Waiver of Liability

| To: Brant Community Futures Do   | evelopment Corpo   | ation o/a Enterprise Brant (herein "Enterprise Brant")  |
|--|--|---|
| interested in obtaining information  | about starting, finar  | ne to Enterprise Brant of my own free will and that I am cing, operating or growing a business, not-for-profit or social of Enterprise Brant offering me advice and suggestions in e.   |
| development of my business. Any a consideration only and I am not bou from any source, but ultimately any any way relying on any advice or su sought such advice or suggestions a by me to accept, adopt, or reject and me or anyone representing me, or respectively. | dvice or suggestions and to take any such decision pertaining ggestions made to make to makes or projections | g, implementation, financing, operation, success and made by representatives of Enterprise Brant are for my advice or suggestions and can obtain advice and assistance to my business is my responsibility. I confirm that I am not in the by representatives of Enterprise Brant, but that I have addent planning for my business. Any choice or decision made the made or given by any representative of Enterprise Brant to sponsibility alone. I understand it is my responsibility to ensure developed are accurate and complete and represent the of my business venture. |
| business which could result from m<br>representatives of Enterprise Brant<br>complete, appropriate or correct ac<br>indirectly, for any reason whatsoev  | y either taking or no<br>, or which could resu<br>dvice or suggestions,<br>er. I confirm that Ent  | ny repercussion, consequences, claim or loss to me or my taking the advice or following the suggestions of the lt from any failure by Enterprise Brant to provide me with or which might result to me or my business, directly or erprise Brant has no obligation to ensure that I take any advice w up on advice, suggestions or business planning, or to  |
| for any loss or damages that might<br>counseling or consultation provided<br>confirm that I am signing this waive  | be suffered by me on<br>I to me by any of the<br>r freely and voluntan   | f Enterprise Brant from any claim that I may have at any time my business or by any other person, in connection with any employees, agents, directors or officers of Enterprise Brant. I ily with full understanding of its meaning and consequences, nt legal advice prior to signing it and have either obtained such   |
| Southern Ontario and the Ministry or records pertaining to me or my bus Brant, and that Enterprise Brant and Ministry of Training, Colleges & Uni  | of Training, Colleges<br>iness, that are now,<br>d/or the Federal Eco<br>versities, may make<br>ice given, or loan ma  | tot limited to, the Federal Economic Development Agency for & Universities, or their successor(s), may have access to the or in future become, in the possession or control of Enterprise nomic Development Agency for Southern Ontario and/or the public announcements or publish information about, or de by Enterprise Brant, to me or my business. This waiver of   |
| Date:  | , 20   | Signature:  |
|  |  | Print Name:   |
| Date:  | , 20   | Witness:  |
|  |  | Print Name:   |
|  |  |   |

### Brant Community Futures Development Corporation Client Attestation for Labour Costs and COVID- 19 Wage Subsidies

As designated financial authority, I attest to Enterprise Brant that neither I, nor my business, have received support through the following federal support measures in the last year:

- i. Business Credit Availability Program (BCAP)
- ii. Canadian Emergency Business Account (CEBA)
- iii. Canadian Emergency Commercial Rent Assistance (CECRA), or other rent relief provided through our organization's landlord
- iv. Canada Emergency Wage Subsidy (CEWS)
- v. Canada Revenue Agency (CRA) Temporary 10% Wage Subsidy
- vi. Service Canada Work-sharing program
- vii. National Research Council of Canada Industrial Research Assistance Program (NRC IRAP) Wage Subsidy
- viii. Indigenous Business Support Loans
- ix. Business Development Bank of Canada (BDC) Co-Lending Program for SMEs
- x. Other federal or provincial programs

for labour, wage costs, or any other expenses included in our Application for Funding to the Brant Community Futures Development Corporation.

Further, I attest that I have not made an application to, or have received support from, the Regional Relief and Recovery Funds (RRRF) as administered by the Federal Economic Development Agency for Southern Ontario (FedDev Ontario), or any other Regional Development Agency (RDA) in Canada.

| Name:       | <br> | <br> |  |
|-------------|------|------|--|
| Position: _ | <br> | <br> |  |
| Company:    | <br> | <br> |  |
| Date:       |      |      |  |