

NORTH CLAYBELT COMMUNITY FUTURES DEVELOPMENT CORPORATION

Application for Emergency Assistance

By completing and signing this application, you attest that all information herein is true and may be subject to verification.

• All questions are mandatory unless stated otherwise.

A. APPLICANT AND CONTACT INFORMATION 1. Business Legal Name:		Operat	Operating name of Business, if different:						
Legal Name of Applicant 1		DOB (DOB (DD/MM/YYYY)						
3. Applicant 1 Home Address		Teleph	Telephone Number			Email	Email		
4. Legal name of Applicant 2:		DOB (I	DOB (DD/MM/YYYY)						
5.Applicant 2 Home Address		Teleph	Telephone Number			Email	Email		
	nization or business and its mandate:								
7.Business Location (Street, Unit N	umber, etc.):								
Country:	Province:		Municipality:				Postal code:		
Canada	Ontario			·					
Business telephone number:	Email:	<u> </u>		Website:	Vebsite:				
8. Type of legal entity: Sole I	Proprietorship Partnership	○ Corp	oration	C	Social En	terprise Co	orporation		
Official language preferred for co	orrespondence: English	Frenc	า						
Date of incorporation or of Master b (YYYY-MM-DD):	ousiness registration		ant busine ue Agency		er (9-digit	business	identifier pro	ovided by	Canada
							·		
A.1 EMPLOYEE AND FINA	NCIAL OVERVIEW								
		New Jo	New Jobs				Jobs Maintained		
A1.1 Number of employees:		# Full	# Full Time			# Full	# Full Time		
		# Part	# Part Time				# Part Time		
A1.2 Financial Overview									
Based on Yo	our Fiscal Year		l Year 202 vailable)		Fiscal	/ear 2019	Fis	scal Year	2018
Total Revenues from all sources (A)									
Total Expenses (B)									
Net Income(A-B)									
A1.3 Status of Current Operation									_
Since the beginning of the COVID- (compared to the same period last	19 pandemic mid-March, have your c year)	urrent rever	nues decr	eased?			Yes	○No	

If yes, by how much?		\$
Has your business been closed, voluntarily or involuntarily, in response	to the COVID-19 pandemic?	○Yes ○ No
If yes, when was the business closed? (YYYY-MM-DD)		
B.1 Please provide more detail on how you are experiencing undue har outbreak caused your business to record losses or to foresee losse negative impacts. (i.e. disruption to supply chains)		
B.2 Is your organization unable to access sufficient operating line or cre Yes No B.3.1 The purpose of this funding is to help you bridge a financial gap under the content of the cont		
B.3.2 What steps are you / will you be taking to ensure long-term sustai	nability?	
B.4. AMOUNT OF FINANCING REQUESTED:	\$	
B5. Please describe how the funds requested will be used in the chart be	pelow:	
Bridge Support Cost Item	Amount (\$)
Commercial Rent / Mortgage		
2. Utilities		
3. Property Taxes		
4. Insurance		
5. Salaries		
Bank Charges, Interest and Loan Repayments		
7. Professional Fees		
8. Suppliers		
9. Cleaning Supplies		
10. Additional Safety Measures		
11. Vehicle Operating expenses		
12. Other (please describe)		
TOTAL		

C. HAVE YOU REQUESTED C	OVID-19 FINANCIAL ASSIS		HER PROGRAM	Application Status		
Department or Agency	Program Name	Applied? (Yes / No / Not Eligible)	\$ Requested	(In Progress, Approved, Rejected, Waiting for Decision)		
Business Development Bank of Canada and Export Development Canada	Business Credit Availability Programs					
Your financial institution	Canada Emergency Business Account					
FedNor	FedNor Regional Relief and Recovery Fund					
Canada Revenue Agency	Canada Emergency Wage Subsidy					
Canada Revenue Agency	1Temporary Wage Subsidy for Employers					
Service Canada	Work-Sharing Program					
Farm Credit Canada	<u>Credit Line</u>					
Canada Revenue Agency	Canada Emergency Response Benefit					
National Aboriginal Capital Corporations	Aboriginal Financial Institution (AFI) Financing					
Your Landlord	Canada Emergency Commercial Rent Assistance					
NRC-IRAP	Wage Subsidy Program					
Other*						
*Other federal, provincial or municipal p	I	ance L				
D. EQUALITY AND DIVERSITY D.1 North Claybelt Community Futures Development Corporation is committed to equality and diversity so that all Canadians have the opportunity to participate in and contribute to the growth of the economy. If your organization does not meet the definitions or you do not wish to declare your status, leave the fields blank. Is your business owned or majority owned by one or more of the following under-represented groups						
Women	Yes No					
Indigenous Peoples	Yes					
Visible Minorities	Yes					
Youth	○Yes ○No					
Persons with Disabilities	YesNo					
LGBTQ2+	◯Yes ◯No					
Francophone	Yes No					

E. CERTIFICATION

On behalf of the Applicant, I hereby acknowledge and/or certify that:

- (a) I have authority to submit this application on behalf of the Applicant and evidence of this authority will be provided upon request.
- (b) I confirm that the Applicant is current on all obligations to the federal government; that the execution of the proposed project will not prevent the Applicant from continuing to meet these obligations and from maintaining the economic benefits anticipated by the other agreements; and that these obligations will not preclude the Applicant from fulfilling its obligations under the proposed project.
- (c) The Applicant is under no obligation or prohibition, nor is it subject to, or threatened by any actions, suits or proceedings, which could or would affect its ability to implement this proposed project.
- (d) The information provided herein is complete, true and accurate and I undertake to provide any further information that may be required for North Claybelt Community Futures Development Corporation to render a decision in a timely manner.
- (e) I confirm that the funding requested in section B.5 above was not eligible for, or supported by, other COVID 19 financial assistance.
- (f) By submitting this application, I certify that North Claybelt Community Futures Development Corporation's funding is required in order for the project to proceed, and agree that North Claybelt Community Futures Development Corporation may make the enquiries it deems necessary to evaluate the application.
- (g) That there has been no material adverse change in the financial position or operations of the Applicant since ________, being the end of the last fiscal year of the Applicant for which a balance sheet and a profit and loss statement have been furnished.
- (h) That the Applicant will be responsible for payment of all charges relative to preparation, execution and registration of such documents as may be required by the Corporation or its solicitors
- (i) That the statements made herein are for the express purpose of obtaining financing from North Claybelt Community Futures Development Corporation and are to the best of the Applicant's knowledge and belief true and correct. The Applicant understands that additional information in support of this application must be supplied to the Corporation, if requested, before adequate consideration can be given to this application. The Applicant realizes that any present or future indebtedness of the Applicant, or the Applicant's business, to the Corporation may become due and payable if any information provided by the Applicant to the Corporation proves to be inaccurate or incomplete.
- (j) That in applying for this financing and, in the event that the Corporation approves such application, the Applicant's personal and confidential business information will be requested from the Applicant and/or collected from third parties that have information about the Applicant's business and personal financial status for the purposes of determining the Applicant's eligibility for financing and reporting to Industry Canada.
- (k) I authorize the Corporation to retain this Statement of Personal Assets and Liabilities and any financial records, credit and reference reports for the Corporation's records and reporting to Industry Canada who oversees the Community Futures Program.
- (I) I confirm receipt of the Corporation's Privacy Statement and understand and consent to the Corporation collecting, using, retaining and disclosing the information contained in this Statement of Assets and Liabilities for the limited purpose of determining my eligibility for financing as is required by law, and by Industry Canada. I understand that the Corporation will handle my personal information in strict confidence in accordance with Federal privacy law as set out in the Corporation's Privacy Policy. If I have any questions or concerns about the management of my information, I may refer to the Privacy Policy, available at https://www.northclaybelt.com/privacy-policy or contact the Chief Privacy Officer.

○Yes ○No	o I am currently the subject of litigation before a court, tribunal, government board or agency, or there is a threat of such litigation. There are unexecuted judgment(s) registered against me, such as:		
Oyes ONo		en petitioned into bankruptcy; there are writs registered against my name. If yes, provide	
Oyes ONo	I certify that I am a Canadian Citizen or	Landed Immigrant.	
Name:		Signature:	
Name:		Signature:	

F. The Applicant Understands and Agrees:

- (a) That the Applicant will be responsible for payment of all charges relative to preparation, execution and registration of such documents as may be required by the Corporation or its solicitors.
- (b) That the terms and conditions of any financing which may be authorized will be set forth in a Letter of Offer, for agreement and acceptance by the Applicant.
- (c) That the statements made herein are for the express purpose of obtaining financing from the Corporation and are to the best of the Applicant's knowledge and belief true and correct. The Applicant understands that additional information in support of this application must be supplied to the Corporation, if requested, before adequate consideration can be given to this application. The Applicant realizes that any present or future indebtedness of the Applicant, or the Applicant's business, to the Corporation may become due and payable if any information provided by the Applicant to the Corporation proves to be inaccurate or incomplete.
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Name of Applicant:		
Signature:	Date:	
Name of Applicant:		
Signature:	Date:	

Submitting Your Application

To submit your proposal for funding, please email the completed application and supporting documentation (see checklist below) to jlabelle@northclaybelt.com. Once your application has been received by North Claybelt Community Futures Development Corporation, you will receive a confirmation email within 2 business days. Please ensure you have correctly noted your contact information on this form.

Submission Checklist

Applicant must provide the following documentation to accompany this

- Historical financial statements for the last two (2) fiscal
- Articles of Incorporation or Master Business License
- Photocopy or picture of 2 pieces of ID for each applicant (one must be birth certificate or passport)

Please confirm that the mandatory documentation, as described above, is attached to this application.

Oyes	
Name of Applicant:	
Signature:	
Date:	
Name of Applicant:	
Signature:	
Date:	

FOR OFFICE USE ONLY				
	Internal Emergency Loan		Regional Relief and Recovery Fund	
	Approved		Declined	
BDO:		ED:		
Date:				