

Business Plan Guide

BUSINESS PLAN GUIDE

Small business is vitally important to the economy. Community Futures Alberta Southwest recognizes this by assisting in the development of small business. This guide is one example of the assistance that we provide. Keep in mind that this guide can be utilized, as general format for what should be included in your own business plan (which is generally suggested), or once completed, the representation of your business plan.

Please try to fill in all of the information as completely as possible. Please note that the information that is requested in this form is generally required when seeking financial assistance for your business. In addition, the more complete your business profile, the better CFABSW staff can assist you with your particular needs.

BUSINESS PROFILE:

Is this a new business, expans business?(please explain fully	ion of an existing business or an acquisition of an existing
involved in:	siness that you are interested in starting or are currently
For existing businesses please	e indicate the following:
Date Business was est	ablished:
For all types of business appl	ications please indicate the following:
Form of business ownership:	
□ Sole proprietorship□ Partnership□ Corporation	Date of registration: Date of registration:

Who are or will be the principals/owners of the business, and what percentage of equity does each own:
Name:% of ownership
Name:% of ownership
Name:% of ownership
INDIVIDUAL INVENTORY
Please indicate what your involvement in your business will be, or what it is currently: (For example what role you will play, and whether it is full-time, part-time, or seasonal)
Have you ever been a manager, owner of a small business or had experience in this type of business?
Will this business be your only source of income? Do you have a secondary source of income in your family, if so please describe:
If applicable, does your spouse support this venture?
MARKET ANALYSIS
Your customers:
Who are they? Age, sex, income?
Where do your customers live & shop?

How often do they buy? Seasonal?
Cash or Credit? Can you afford to carry accounts receivable?
What is your proposed market area-what is the population of this market? (Please indicate how you arrived at this number)
What is the number of potential customers that will purchase from you?
You must realize that some of your potential customers will not purchase your product or service.
 Number of potential customers in your area (from previous question)
If this formula does not apply, please describe your potential customers-who will be purchasing your product or service:
Your competition
How many competitors do you have, how big are they, how old, how strong?
What percentage of the market do they have? How far away are they? What advantages do they have? What weaknesses do they have?

What advantages do you have with your business? What percentage of the market will you get?
Does your business possess any weaknesses or risks? If so, how will you overcome these?
Why do you think that your business will be a success?
Your Products or Service
Is it unique? Better designed or higher quality?
Is there a need for your product or service?
What will be your return policy? Will you have to offer a guarantee?
Will you have to stock parts for service?
Pricing
Do you know what price you will have to charge to cover your costs?

Are your prices competitive?
How important is a low price? Is service more important?
Vill you have to give discounts for cash, volume, distributors, salespeople? If so, wh vill discounts do to your mark up?
Must you include a delivery cost in your price?
Advertising
How much is normal for your product or service?
What media? How often? Seasonal?
Do you have a logo?
s any free publicity available?

om whom? Is this the best deal you could
sold merchandise?
verstocks, understocks, and out of stocks?
ch supplier? How must you pay: COD, 30
w materials, state what the sources of these that will be providing your business with on.
Supplier Name/Source
ary source is disrupted? Who are they?

Location

your existing business including the address, city, postal code, & phone number:
What features make this a good location for your business? Are there other nearby businesses?
Zoning
Does the present zoning and future zoning allow for the operation for your proposed type of business?
If it has to be rezoned for your type of business-what time span is involved and at what cost will the rezoning be performed?
Building
What is the outside and inside appearance of your proposed building? Keep in mind what the layout will be, the lighting, heating, floors, acoustics, comfort, waste disposal, storage parking, landscape, snow removal.
THYMINDON.

Prepare visual aids to show your location-It is often easier to describe your location to an outsider through the use of maps, pictures, and a diagram of the layout.

- ♦ Take pictures of your proposed building and any businesses surrounding it.
- On a copy of a map of the area, indicate the location of your proposed business, and any major reference points.
- ◆ Draw an accurate diagram of your floor space. Indicate the location of equipment, furniture, and fixtures.

Lease
Has the lease agreement been checked by a lawyer? Is the length of the lease too short or too long? Are there any options available?
What are you responsible for in the lease? What is the landlord responsible for?
Approvals
Will government regulatory bodies approve your use of the building?
Will there be any problems in obtaining approval from zoning, health, fire marshal, transportation, environment, or labor regulatory bodies?
Utilities
What do the power, water, sewer and gas supplies cost?

Are the utilities adequate for your business? If not, how much will it cost to upgrade them to your requirements?
Taxes
Have you determined what the present and future assessment for property and business taxes will be for your business?
Restrictions
Are there any legal easements on your property?
Can you grow in physical size?
Insurance
What insurance coverage will you have in regard to fire, theft, public liability, business interruptions? What is the cost associated with insurance coverage?
If there is no sprinkler in the building, can you still get insurance coverage? What insurance rating is on the building?
Labour
How many employees will you need?
Will they have to be skilled, or can they be unskilled?
What wages will you offer? What are competitive wage rates in the area?

Will they be full-time, part-time, season	nal? What hours will you l	have them working?
How will you find new employees, and	how will you train them?	
Equipment		
List all equipment, fixtures, and furnituthe cost associated with each item:	are required, whether the	item is new or used, and
Item	New or Used	Cost-Including GST

Do any of the items have additional ins	tallation costs? If so, hov	v much?
The state of the s		
Are there any maintenance costs associ	ated with any of the equip	oment? If so, how much?

For any applicable equipment, please indicate to	erms of sale and any guarantees:
Financing Please indicate how the bookkeeping/payroll with the bookkeeping	ill be addressed?
Troube indicate now the cookseeping, payton w.	iii oo aaarossoa.
How much money do you want to borrow? Specifically, what will your loan be used for, a each item:	
Item	Cost
How much of your own funds will you be business?	investing, or have you invested in your
How much do you think that you can afford to	o pay back each month? What would you
like the term of your loan to be?	Political Political Control of the C

PERSONAL FINANCIAL STATEMENT

ASSETS	VALUE	LIABILITIES	VALUE
REAL ESTATE		MORTGAGES	***************************************
			14117-00/00/1004-0
CASH ON HAND		BANK LOANS	
CASH ON DEPOSIT		DANK LOANS	
STOCKS? BONDS?			
VEHICLES (Make and		FINANCE	
model)		COMPANIES	
,		CREDIT CARDS	

RECREATIONAL			
EQUIPMENT		יייי די די די	
	***************************************	RENT OTHER LIABILITIES	
HOUSEHOLD &		OTTIER LIABILITIES	· · · · · · · · · · · · · · · · · · ·
PERSONAL EFFECTS			
OTHER			
ASSETS/INVSTMNTS			
EQUITY IN			
BUSINESS			
TOTAL	(a)	TOTAL	(b)
	<u> </u>	•	
_			
NET WORTH\$	(Ca	alculated by taking total a	ssets (a) and subtracting
total liabilities (b).			
I certify that the inform	ation on this statement	covering my income, asset	te and liabilities is a true
		knowledge that CFABSV	
relies on the accuracy o			, ,, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	•		
I have attempted to find	l traditional financing el	sewhere.	
V	41		
rour signature provides	s us the necessary author	rization to check with you	r creatiors and Equitax:
DATE:			
SIGNATURE:			

*PLEASE NOTE: IF YOU ARE USING THIS GUIDE TO APPLY FOR FUNDING WITH CFABSW PLEASE INCLUDE COPIES OF TWO PIECES OF IDENTIFICATION - ONE BEING PICTURE IDENTIFICATION.

DETAILS ON ASSETS

• For any applicable assets please indicate the following:

ASSET-(ex. cash)	BANK	BRANCH LOCATION	ACCOUNT NUMBER

• For any real estate, or mortgages please indicate the following:

LEGAL DESCRIPTION	YEAR	PRICE	ESTIMATED	BALANCE
CIVIC ADDRESS	PURCHASED	PAID	VALUE	OUTSTANDING
				
		<u></u>		

DETAILS ON LIABILITIES

• For any bank loans please indicate the following:

	Loan 1	Loan 2	Loan 3
Purpose of Loan			
Date Loan Obtained			
Amount of Loan			
Name of Lender			
Location of Lender			
Monthly Payment			
Collateral Utilized			
Balance Owing	***************************************		A A A CORP. THE PROPERTY OF TH

• For any other liabilities please indicate the following information.

•	LIABILITY- SPECIFY	LIABILITY- SPECIFY	LIABILITY- SPECIFY
To Whom:			
Monthly Payment:			
Balance Outstanding:			

PERSONAL INFORMATION

Full Name (including middle name):		
Date of Birth: (M/D/Y)		S.I.N.#
Marital Status:	# of I	Dependents (Excl. Spouse):
Full Name of Spouse: (if applicable)		
Spouse Date of Birth:		Spouse S.I.N.#
Present Address: Street or Box#		
Town or City:		Postal Code:
Number of years at current address:		Rent or Own:
Complete Previous address (if less than 3 y	years a	t current):
Telephone (Residence):	Tele	phone (Bus):
Life Insurance Policy Value:	1 1010	Beneficiary:
Have you ever declared bankruptcy?	Tm	stee Name:
If Yes, Are you a discharged bankrupt		f so, what was the discharge date
Please list your spouse's current	t ear	mings per year (if applicable):
Please list any other sources of income income, royalties etc.):	that y	ou may have (such as dividends, rental
Please indicate if you are currently eligible are receiving a benefit please list what amo		ceiving unemployment insurance. If you

YEAR		CATION/TYPE O NING	F ORGANI INSTITU	
		-		
MICA BOLLAN		,		
lease list the	following in regard to	employment:	Iromonatan .	
◆ If you hav	e been employed less ous employment posit	than two years by yon as well.		
 If you have your previous 	e been employed less	than two years by you as well.	our current en	SALARY, WAGES, OF
If you have your previous	e been employed less ous employment posit ORGANIZATION- NAME, ADDRES	than two years by you as well.		SALARY, WAGES, O
 If you have your previous 	e been employed less ous employment posit ORGANIZATION- NAME, ADDRES	than two years by you as well.		SALARY, WAGES, O

Please indicate if you have provided any guarantees on debts of others. If so, how much

have you guaranteed:

PERSONAL RESUME

CASH FLOW WORKSHEET INSTRUCTIONS

When completing your cash flow projections think in terms of any deposits you make as being your sales, and any cheques you would be writing as expenses for each month in the year. The following descriptions should clarify what amount you should be entering for each section.

REVENUE-Cash Receipts

Cash Sales Receipts: This figure should include your cash sales and any accounts receivable you receive on a month by month basis. A cash sales and accounts receivable worksheet has been included for you to determine this amount.

Accounts Receivable: This amount should be a total of all accounts receivable that were actually collected for that particular month.

Other Cash Receipts: This figure should include all other cash receipts not included under cash sales receipts, and accounts receivable.

Total Cash Receipts: This should be the total amount of cash sales receipts, accounts receivable and all other cash receipts.

Less Cost of Goods Sold: This figure represents how much it costs you to get the product to your place of business. This can be calculated as a percentage of your sales, or if you have a purchasing pattern you should enter the amount in the month the actual expense occurs.

Net Revenue: This figure is the Total Cash Receipts figure minus the Cost of Goods Sold.

EXPENSES-Cash Disbursements

Rental/Lease Expenses: This is the amount of money that you must pay each month to rent or lease the premises to carry on your business. It can be a storefront, warehouse or a personal residence.

Salary/Wage Expenses: This is amount of wages and benefits paid to all employees per month and should include holiday pay, EI premiums, CPP premiums, group insurance etc. as applicable.

Owner's Salary: This is amount of money that will be taken out of the business by the owner including a management salary, any drawings etc.

Loan/Mortgage Payments: This figure should include any loans or mortgages associated with the start-up and operation of the business and should include the principal as well as the interest paid on a month by month basis.

Telephone Expenses: This figure should include any expenses associated with telephone, cell phone, pager, fax and Internet costs for the month.

Utilities: This amount should include all expenses relating to heat, light and power costs.

Professional Fees: This is any money that you pay for professional services such as bookkeeper/accountant fees, and lawyer expenses.

Advertising/ Promotion Expenses: This figure should include any print or media advertising expenses incurred for the month such as for newspaper ads, radio, television, yellow page ads, and any other promotional expenses such as tradeshows, promotional lunches, promotional freebee items.

Lease/Rental Payments: This figure should include all lease or rent payments related to the cost of leasing or renting any equipment or vehicles utilized in your business.

Business taxes, fees, & licenses: This figure relates to any expenses incurred for business licensing and fees including municipal business license, federal or provincial licensing and any other association licenses. Fees should include charges for memberships, loan and service fees. Business taxes should include the amount of business taxes paid, and should be accounted for in the month they actually occur.

Insurance: This amount should include any business or personal insurance including fire insurance, liability insurance, life insurance, loan insurance etc.

Bank Charges: Should include all banking charges including service charges, overdraft charges, Visa/Mastercard/Interact commissions, etc. This amount should not include bank loan interest, which is already covered under loan payments.

Transportation & Travel: This will include all expenses relating to the use of vehicles to carry on your business including, fuel, oil, repairs, and insurance. It should also include any costs associated with travel for purposes relating to the business, such as meals and accommodation.

Office/Shop Supplies: All supplies purchased for business purposes including stationary, janitorial supplies, paper supplies, clothing etc., and excluding the product you sell.

Property Taxes: This amount should be the relevant property taxes paid relating to business usage, and should be allocated to the appropriate time frame it is deducted in.

Purchase of Fixed Assets: This category should reflect any purchases of fixed assets relating to the business such as computer equipment, furniture etc.

Freight Expenses: This amount relates to any costs associated with shipping or receiving supplies or products for use in the business.

All Other Operating Expenses: This relates to all other expenses not already categorized and would include things such as postage.

Contingencies 10%: This section is reserved for unplanned expenses. No matter how hard you try to plan for everything there is always something that you don't count on or miss. The way to account for this expense is to add together all expenses listed above this item and take ten percent of that total.

Total Expenses: This is the total amount of all cash paid out.

Income Tax Payments: This should include all amounts paid for income taxes relating to the business.

Surplus/(Deficit): This is Net Revenue minus Total Expenses. This number will indicate how much you have made or lost during the current month.

NOTE: If you have any large expense categories not accounted for on this particular cash flow, you should amend your cash flow statement to reflect the appropriate expense categories.

Pick	CASH RECEIPTS	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10 Month 11	 Month 12	Totals
Collected Accounts Receivable Collected Receipts ————————————————————————————————————	Cash Sales Receipts												
Collet Cach Receipts	Collected Accounts Receivable												
Total Cash Readplis	Other Cash Receipts												
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