

**SCHEDULE "B"**



**AUNDECK OMNI KANING FIRST NATION  
BUSINESS LOANS PROGRAM**

**APPLICATION**

|                            |       |
|----------------------------|-------|
| For office use:<br>Loan #: | Date: |
|----------------------------|-------|

**PERSONAL INFORMATION:**

|       |                                    |                                |                                |
|-------|------------------------------------|--------------------------------|--------------------------------|
| Name: | <input type="checkbox"/> Business: | <input type="checkbox"/> Home: | <input type="checkbox"/> Cell: |
|-------|------------------------------------|--------------------------------|--------------------------------|

|  |                            |
|--|----------------------------|
| Address: (Lot and Concession, 911 House #) | Address: (Mailing Address) |
|--|----------------------------|

|              |              |
|--------------|--------------|
| Postal Code: | Postal Code: |
|--------------|--------------|

Email Address:

Band Membership #: (10 digit)

**BUSINESS PROFILE**

|                |                     |                |
|----------------|---------------------|----------------|
| Business Name: | Business Ownership: | Business Type: |
|----------------|---------------------|----------------|

Is the Business: (check one)       Full-Time       Part-Time       Seasonal

For part-time or seasonal operations please provide details on a repayment plan for the off-season.

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Your Involvement: (check one):       Full-Time       Part-Time

For Part-Time please provide an explanation of your management plan.

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Loan Requirements:       Capital       Operational       Working Capital       Marketing

|                    |                  |
|--------------------|------------------|
| Amount Requesting: | Purpose of Loan: |
|--------------------|------------------|

| Security/Collateral: | Description | Make/Model | Year  |
|----------------------|-------------|------------|-------|
| Current Value        | <hr/>       | <hr/>      | <hr/> |
|                      | <hr/>       | <hr/>      | <hr/> |
|                      | <hr/>       | <hr/>      | <hr/> |
|                      | <hr/>       | <hr/>      | <hr/> |

**FINANCIAL STATEMENT** (if existing business, please attach your most recent financial statements)       Attached       Not Applicable

| ASSETS (what you own)  | LIABILITIES (what you owe)        |
|--|-----------------------------------|
| Cash:  | Outstanding Loans:                |
| Liquid Assets: (bonds, etc.)   | Credit Card(s) and Balance Owing: |
| Property:  | Other Debts:                      |
| Automobile(s):   |                                   |
| Other Assets:  |                                   |
| <b>TOTAL ASSETS:</b>   | <b>TOTAL LIABILITIES:</b>         |
| <b>TOTAL NET WORTH:</b>  |                                   |
| Personal Income: (Annually)  | Employer:<br>Contact and ☎:       |
| Spouse Income: (Annually)  | Employer:<br>Contact and ☎:       |
| <b>Additional Information:</b>   |                                   |
| <p><b>DECLARATION:</b></p> <p>I/We, the undersigned hereby declares that all information provided herein and on the accompanying statements is to the best of my/our knowledge true, complete and correct and understand that it will be used by the Aundeck Omni Kaning First Nation Economic Development Advisory Board to determine credit worthiness. Furthermore, the business loan, if approved, shall be for the sole purpose of which it is intended.</p> <p>Signed By: _____ Print Name: _____ Date: _____</p> <p>Signed By: _____ Print Name: _____ Date: _____</p> <p>Witnessed by: _____ Print Name: _____ Date: _____</p> |                                   |