FINANCIAL ASSISTANCE REQUEST



1. BUSINESS

□Company □	Sole owner	□Corporatio	on 🗆	☐Cooperative	□Non-profit organiza
Name :					
Description of business					
Address of headquarters	s:				
					Postal code :
Email : Website :					
2. BORROWER(S)					
Name :					
Address :					
City:					
Postal code :					
Shares % :					
Telephone :					
Cell phone :					
Email :					
SIN:					
Date of birth :					
3. FINANCING REC	QUEST				
Requested financing:		_ \$ □	Regular loan	□Busine	ss succession
			Youth Strate		nable development
PROJECT COST			FINANCI	NG	
Working capital			Capital o		
Inventory				institutions	
Property and building			SADC		
Infrastructures improven	nents		Others :		
Equipment Others:					
Ouidis .					
	Total :				Total :
		1	ı		
The project should creat	te full-time	jobs,	part-time jobs	S.	
The project should main	itain full-tim	ie jobs,	part-time job	os.	

4. OTHER PARTIES

Partner(s) or co-borrov	wer(s), if appl	icable :		Telephone
Financial institution : _				
Accountant :				-
Others :				
•	n into conside	ration, there are	DC des Îles if at any time during the period contacts, negotiations or offers on the part	·
5. DECLARATION	I			
•	•		on or procedure to any court, commission or ne business for non execution, except:	government agency and,
Past bankruptcy :	□Yes	Date :		
	□No			
If applicable, the term business.	s of any auth	orized financial	assistance shall be outlined in a letter of off	er to be submitted to the
best of our knowledge	, accurate an	d true in all resp	otaining financial assistance from the SADC ects. The business agrees that any additional uest for financial assistance can be taken into	al information required by
Signature of 1 st sponso	or		Signature of 2 nd sponsor	
Date			Business	

6. APPLICANT'S AUTHORIZATION

I, the undersi	aned (t	orrower))						declar	_ mvse	elf to be duly
authorized	to	act	on	behalf	of	(name h		corporate quest assistanc	name	of	business)
I declare to be	e acting	on my þ ا	oerson?	al behalf an	ıd on the	at of the bu	siness as	regards the sig	gning of the p	resent c	document.
I hereby autherenquiry that it				•	any indi	ividual, con	nmercial c	concern, organ	ization or inst	titution,	all forms of
the purpose	of estab	blishing o	or verif	ifying my fir	inancial	situation.	This autho	om or with any orization is val ive with the SA	alid for the pe		
				•				ssarily be app d entire respon	•	teps I n	nay take or
	es may	y have gi	given m			-	-	ated to any ac ne present rec			
I authorize Ca	anada E	Economic	: Devel	opment to v	verify th	ie use that	will be mad	de of the SAD	C's financial a	assistan	ice.
Signed in						,	on this the	e day of ₋			20
Signature of 1	1 st spon	ısor					Sign	nature of 2 nd sp	oonsor		
I authorize SA		•				J			□Y	es [□No
Where did you	u hear a	about the	; SADC	;?					_		
The SADC, reinformation of							, U	undertakes to r	respect the co	onfidenti	iality of the
Signed in					, on	this the	day of .			20_	·
_											

ANNEX REQUIRED SUPPORT DOCUMENTS

Section to be filled out by SADC

□ Business backgroung
☐ Project description (concept and details)
☐ Market study
☐ Current jobs ans descriptions
☐ Name of shareholders/associates/managers (%)
☐ Curriculum vitae
☐ Personal balance sheet
☐ Real financial statements (last 3 years)
☐ Up-to-date interim financial statements
☐ Financial forecasts (2 years) and hypotheses
☐ Copy of contracts in hand
☐ Clients accounts and supplier accounts (itemized)
☐ Update status of government remittances (DAS, TPS, TVQ, Corporate taxes)
☐ Bank confirmation
☐ Purchase offer or deed
☐ Evaluation of costs and supporting documents
☐ Incorporation or registration charter
☐ Marketing plan
☐ List of equipment
☐ Others :

Retournez à : sadc_iles@ciril.qc.ca