Small Business Assistance Application

CONTACT INFORMATION								
Business name:								
Contact first name:						Contact last r	nam	e:
Civic address:								
Mailing address:								
City, Town, Community:						Province:		Postal code:
Telephone:						Cell phone:		
Email:						Website:		
	_	_		_				_
BUSINESS INFORMATION								
Are you registered to do b	ousiness in PEI?	0	YES	0	NO	Business nui	mbe	r (BN):
Is the business a new or e	xisting business?	0	New, op	erat	ting 12	months or less	;	
		0	Existing	bus	iness, o	perating great	er th	nan 12 months
Form of business:	O Sole proprieto	or		0	Partne	rship	0	To be incorporated
	O Incorporated				Coope	•		Other
Business Category:								
Art Entertainment D	acrostica 9 Cultura			\circ	Donou	abla Enargy		
Art, Entertainment, RoBioScience	ecreation & Culture	:			Retail	able Energy		
O Construction					Service	2		
O Craft & Giftware				0	Tourisi	m/Accommoda	atior	1
O Food & Beverage				0	Transp	ortation & Wa	reho	ousing
O Information Technolo	gy			0	Other			
O Manufacturing & Prod	cessing							
Provide a description of the	ne business's opera	tions	S:					
<u> </u>								



Is the income from this business the applicant's primary (Excludes: pension, investment, rental and other sources of passive		income?	O YES	O NO
Number of current employees on PEI, excluding owner (minimum of 560 hours per year)				
What is the business's estimated annual gross revenue		Year end date	\$ Amount	
What is the business's current gross revenue to date (Ja	resent)?	\$		
Does the business have export sales (ships off PEI)?			O YES	O NO
If yes, what were the previous year's export sales?			\$	
PROJECT INFORMATION				
Identify the main focus of the project				
Select all that are appropriate:				
O Financial/Business Planning	0	Marketing	and Promotion (New Business)
O Market Research/Planning	0	Quality/Pro	ductivity Improv	vements
O Human Resource Planning	0	Other		
Provide a detailed description of the project (be specifi	c)			
Explain how this project will benefit the business				
Start date:	End date:			
	Liia date.		equest for paymen of the end date)	t must be made within 3



If you are applying for marketing and promotion ar uploaded outlining project details and cost.	nd do not have a quote, a detailed cost document must be
Financial/Business Plan or Market Research	\$
Professional Consulting	\$
Marketing and Promotion (New business)	\$
Total	\$
Note: you must attach service provider	quotes when submitting your application.
Will the business receive funding from other gover	nment sources for this project? O YES O NO
If yes, provide details of other potential funding so	urces
Additional Comments	



APPLICANT'S DECLARATION, CONSENT AND DISCLOSURE AGREEMENT

0	I declare that the information I have provided to the Government of Prince Edward Is attachments is to the best of my knowledge and ability, true, accurate, and complete	• •				
0	I agree that by submitting this application, I am giving permission for the collection, use, and disclosure of my personal or business information with other government departments, agencies, organizations, and permission to use information provided in previously submitted program applications for the purpose of confirming eligibility for Small Business Assistance.					
0	The applicant consents to having Innovation PEI make any inquiries of such persons deems necessary in order to reach a decision on this application.	, firms, or corporations as it				
Signa	ture of authorized official:	Date:				
Print	name of authorized official:	Title:				

Please submit your completed application and attachments to Innovation PEI.

94 Euston Street, PO Box 910, Charlottetown, PE C1A 7L9

Phone: (902) 368-6300 * Email: business@gov.pe.ca * www.innovationpei.com

