



**RENFREW COUNTY**  
Community Futures Development Corporation  
Société d'aide au développement des collectivités

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# Eastern Ontario Development Program

## **Business Planning Application 2008**



EODP Business Planning Application Form 2008



**Business Planning Application**

Thank you for applying to the Renfrew County Community Futures Development Corporation's (RCCFDC) ***Business Planning Program***. Detailed below are the contents of the supporting documentation package that must be submitted with your request for funding. This should provide sufficient information to permit an assessment and decision on your application. RCCFDC may request additional information or clarification of the data provided. All information provided will be kept strictly confidential.

Please complete and sign the accompanying RCCFDC application form and return the package to:

*Ms. Diane McKinnon, Executive Director  
Renfrew County Community Futures Development Corporation  
2 International Drive  
Pembroke, ON  
K8A 6W5  
Re: Business Planning Program*

**Deadline for the receipt of completed applications is Thursday, March 27, 2008 at 4:00 p.m.**

Applications are assessed on the following:

- a. *Eligible recipients include existing and potential businesses and entrepreneurs as well as not-for profit association/organizations. All eligible recipients must be conducting activities in Renfrew County;*
- b. *Consultants must be at arms length (third party) and should be experienced, professional and recognized as providing high quality work;*
- c. *Applicants must demonstrate that they will be highly involved in the planning process and agree to provide monthly status reports;*
- d. *Partnerships and projects with leveraged funds in cash will be given priority;*
- e. *Eligible expenses are net costs before PST and GST;*
- f. *RCCFDC may contribute up to 50% of the consultant's costs up to a maximum of \$2,500.*
- g. *Projects will be required to submit a final report, which will include a summary of activities and accomplishments.*
- h. *All funds must be expended and business plans completed by March 1, 2009.*

If the application is approved, Renfrew County Community Futures Development Corporation will prepare a letter of offer with terms and conditions. Any questions or concerns regarding the application process or the ***Business Planning Program*** should be directed to Dana Jennings, Project Coordinator at 613.735.3951 ext. 226.



**Business Planning Application**

Organization:	
Contact Name:	
Address:	
Telephone:	
Email:	
Purpose:	
Amount Requested:	

Authorizing Signature		Date
Name		



**Eastern Ontario Development Program**

**Business Planning Application Form**

<b>LEGAL NAME OF APPLICANT OR ORGANIZATION</b>						
<b>CONTACT NAME</b>						
<b>ADDRESS</b>						
<b>CONTACT PERSON</b>	___ Mr. ___ Mrs. ___ Ms. ___ Blank					
<b>TELEPHONE NUMBER</b>						
<b>FASCIMILE NUMBER</b>						
<b>E-MAIL ADDRESS</b>						
<b>LEGAL DESCRIPTION</b>	<input type="checkbox"/>	Incorporated	<input type="checkbox"/>	Sole Proprietorship		
	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Other Specify		
	<input type="checkbox"/>	Not for Profit	<input type="checkbox"/>			
<b>NUMBER OF EMPLOYEES</b>	<input type="checkbox"/>	Full-Time	<input type="checkbox"/>	Part-Time	<input type="checkbox"/>	Seasonal

<b>How did you hear about the Eastern Ontario Development Program? (Choose all that apply):</b>			
<input type="checkbox"/>	M.P.	<input type="checkbox"/>	RCCFDC Staff
<input type="checkbox"/>	Newspaper/Radio Advertising	<input type="checkbox"/>	RCCFDC Website
<input type="checkbox"/>	Previous RCCFDC Application	<input type="checkbox"/>	Other (please specify)
<input type="checkbox"/>	Word of Mouth	<input type="checkbox"/>	

<b>Have you received funding from RCCFDC in the past three years?</b>		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>If yes, from which programs:</b>					
<input type="checkbox"/>	Community Capacity	<input type="checkbox"/>	Local Initiatives		
<input type="checkbox"/>	Skills Development	<input type="checkbox"/>	Youth Internship		
<input type="checkbox"/>	Business Planning	<input type="checkbox"/>	Access to Capital		



**Business Description: Provide a brief description of the organization and primary activities of trade. (e.g.: key markets serviced, primary activities and results, number of staff etc.) Outline whether your business is new or expanding.**

**What type of plan will the funding be used for?**

	Business Plan		Marketing Plan		Export Plan
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**What business sectors will benefit from your plan?**

	Strategic Planning		Retention/Expansion of Existing Business
	Tourism Events		Integration of Technology Into Services
	Small-Scale Capital Projects		Community-Based Economic Development
	Marketing/Promotion		Research Projects
	Other		

**How?**



**Project Description: Provide a full description of the plan's purpose. Specify objectives to be achieved and critical issues that the plan will address.**

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**Work Plan: Identify project activities, work plan, anticipated results, how results will be measured and who will be responsible for delivering on the results.**

<b>PROJECT TASK</b>	<b>TIME FRAME</b>	<b>MEASURABLE RESULTS (and how they will be measured)</b>	<b>TASK MANAGER</b>

*Project Coordinator/Consultant Selection: Identify process to be used for securing consultants, if applicable. Detail specific process, qualifications sought. List credentials and references for successful applicant.*

**Qualifications: Describe educational qualifications, and details of other specific areas of expertise or qualifications sought in a successful candidate.**

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**Hiring Process: Identify type of process and sources to be used for the recruitment and hiring of the consultant. (e.g.: RFP, Media, etc.)**

**Economic Benefits and Expected Impact: Describe how the successful plan might benefit the local or regional economy. Outline opportunities that may result from executing a professional plan. (e.g.: Well researched data to make critical business decisions, long term job creation or maintenance, need for increased capital).**

**Project Costs and Financing: Identify and substantiate detailed project costs using the table below. \* Note: RCCFDC may contribute up to 50% of consultant's costs up to a maximum of \$2,500.**

Costs		Financing	
<i>Eligible Supported Costs:</i>	<i>Cost</i>	<i>Source of Leveraged Funding</i>	<i>Contribution Amount</i>
	\$	RCCFDC Contribution	\$
	\$	Contributions From Other Sources	\$
	\$		\$
	\$		\$
	\$		\$
<b>TOTAL COSTS</b>	<b>\$</b>	<b>TOTAL FINANCING</b>	<b>\$</b>

**The totals provided for Total Project Costs and Total Project Financing should be equal. Please include all cash and in-kind contribution. Please also ensure that all other federal, provincial or municipal assistance to the project has been listed in the above chart.**





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**Please provide a monthly cash flow projection for your project using the table below:**

<b>Month Cost Incurred</b>									
<b>Project Item</b>	<b>Month 1</b>	<b>Month 2</b>	<b>Month 3</b>	<b>Month 4</b>	<b>Month 5</b>	<b>Month 6</b>	<b>Month 7</b>	<b>Month 8</b>	<b>Total Project Cost</b>
									\$
									\$
									\$
									\$
									\$
<b>Project Cost by Month</b>									\$

**List in point form any attachments which may include letters of support, financial information, terms of reference for consultants or associated quotes, relevant background information on the business or preferred consultant. \*Note: List the supporting documentation only. We will contact you to request a copy if required.**





**Declaration**

*We confirm that the information contained in this application is true, accurate and complete. I acknowledge that if this application is approved, I will be required to enter into a formal, legally binding agreement with the Renfrew County Community Futures Development Corporation that will outline the terms and conditions of the funding associated with Eastern Ontario Development Program.*

*We hereby commit to mentioning the financial help received in virtue of the Eastern Ontario Development Program.*

**Name and signatures of two signing authorities.**

Name (please print):	Name (please print):
Signature:	Signature:
Title:	Title:
Date:	Date: