

A. Applicant Information

Purpose for application for a small business grant:

	New Business		Exist Busi	_		Business Expansion				Youth Entrepreneur		ır		Elder		
	Dusiness		Dusi	11035		LA	Janoi	1011				Г				
Date	Date of Application:															
Applicant Last Name:				Middle Initial:			First:									
Addı	ress:						City/Town:									
Prov	ince:		Pos	stal Code	2 :		Email:									
Phon	ne Number:		<u> </u>			Cell:				Other:						
How	How did you learn about the Piikani Grant Equity Program? (Check all that apply)															
I	Print Adverting	3		Social	Media	i			W	Word of Mouth				Bu	isiness Contact	Ī
I	Past/Current Cl	lient		PRDL	Webs	ite			Ot	ther Website			Ot	her:		
Have	e you previousl	ly appli	ed fo	or a smal	ll busi	ness	gran	nt, t	hrou	agh the	e Piik	ani G	rant	Equi	ity Program?	
			YES	3							NO					
<u>If</u> yo	u marked yes:															
Year	(s) of applicati	on:														
Busi	ness Type:															
Busi	ness Name:															
Is thi	Is this business still in existence?															
10	YES NO															
If ye	f yes, please describe:															



Have you taken small business training	g or can demonstrate business kr	nowledge?				
YES	□ N	Ю				
If yes, please attach certificate, degree	e, diploma etc.					
Have you previously been awarded a	grant through the Piikani Grant E	Equity Program?				
YES		(O				
If you marked yes:		O				
Year(s) of application:						
Business Type:						
Business Name:						
B. Business Information						
Is the business mailing address the san	me as the applicants mailing addr	ress?				
YES	NO					
If different please indicate:						
Business Phone:	Business Fax:	Website:				
Number of employees:	Full-time:	Part-time:				
L						
What is your Business Structure?						
Sole-Proprietorship	Sole-Proprietorship Partnership Corporation					
Is this business located on a First Nation Community?						
Please provide copy of BCR (Band Council Resolution) Please provide a copy of Business License Business License						
Business Name:						



B.1. Business Description

Tell us about your project (e.g. What products/service will you be offering or are currently offering?
What's your current/ existing target market? Who are your competitors? etc.)

Attach additional supporting documents (e.g. Business Plan, market studies, business studies, and or relevant industry information)



B.2. Estimated Project Costs and Financing

Estimated Project Costs	\$	Estimated Project Financing	\$
Capital		Applicant Cash Equity	
Building		Piikani Grant Equity Program	
Land		Commercial Financing (specify below)	
Equiptment			
Inventory			
Other (specify below)			
		Total Commercial Financing	
Total Capital		Other Government Financing (specify below)	
Operating			
Rent			
Utilities			
Insurance		Total Government Financing	
Other (specify below)		Other Financing (specify below)	
Total Operating			
Marketing			
Business Planning			
Business Support		Total Other Financing	
Total Estimate Proie	ct Costs M	Aust Equal Total Estimated Project Financing	
TOTAL ESTIMATED PROJECT COSTS		TOTAL ESTIMATED PROJECT FINANCING	

Please provide proof, of any additional commercial financing or additional funding.

]	Piikani Grant Equity Program
Grant Request Amount:	



B.3. Projected Expenses

NOTE: ***A quote from each supplier is required to be submitted with the application for the projected expenses, and we encourage the use of an Aboriginal supplier. ***

PROJECTED EXPENSES FOR THE \$5,000						
Name of Supplier	Description of Expense	Total Expense				
		\$				
	\$					

C. Ownership Information

List all owners and partners

Full Name	Date of Birth	Ownership

C.1. Education and Experience

Attach a resume for each individual identified above. Resume should highlight individual's education, training, employment history and other experience relevant to the proposed business.



Documentation Requirements Checklist

Ensure the following documents are submitted with your application or the grant <u>may not</u> be approved.

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Business Plan To include:
 Proof that the business is owned by a Piikani Nation Member. Copy of status card, and where required a copy of the articles of incorporation and partnership agreement. Copy of BCR Copy of Business License
A copy of the projected timeline and budget from beginning to end and milestone dates of the business/project/initiative - If a separate document: NOTE: A report must be completed and submitted to Piikani Resource Development Ltd. on the business/project/initiative by March 31, 2022.
Resume of Owner(s)
Proof the applicant has contributed equity to business
Copies of quotes from the suppliers.
Samples of marketing.
Read and understand the Program Policy

Incomplete applications cannot be considered, please see a copy of the grant equity guidelines for further information.



Acknowledgment &	ζ	Rel	ease
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Ι,	declare that the info	rmation on this grant e	quity application form to the bes
of my (our) knowl	edge and belief is true, correct	and complete.	
Signature		Date	

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

Completed application:

Piikani Resource Development Ltd.

RE: Piikani Nation Grant Equity Program

Drop Off: 1835 15th Avenue Brocket, Alberta

Mail: P.O. Box 3242 Brocket, Alberta T0K 0H0

Fax: (403) 965-2626

Email: gep@prdl.ca

Program policy & upcoming trainings and events:

Website: https://www.prdl.ca/economic-development.html

LinkedIn: linkedIn: linkedIn.com/in/prdl
Facebook Friend: Piikani PRDL

Facebook Page: Piikani Resource Development Ltd.

Twitter: @piikanirdl