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[insert logo if available]

**BUSINESS PLAN - COVER PAGE**

Business name:

Business Address:

Business Telephone Number:

Business Website:

Business Email Address:

Contact’s name:

Contact’s Address:

Contact’s Telephone Number:

Contact’s Email Address:

**TABLE OF CONTENTS**

**EXECUTIVE SUMMARY**

**BUSINESS DESCRIPTION**

Describe your business product(s) and/or service(s):

Type of business: (i.e. manufacturing, retail, service)

Status of business: (i.e., start-up, expansion, etc.)

Ownership: (i.e., sole proprietorship, partnership, corporation, franchise)

Anticipated opening date: (if this is a new business)

Description of the businesses geographical trade area:

Hours of operation (if applicable):

Describe seasonal trends (if they apply):

Background of business idea: (explain where the idea for this business originated)

Existing businesses:

* + provide a brief history of the business
	+ provide date of registration or incorporation
	+ list sales, gross margins, and profits to date

**BUSINESS OBJECTIVES**

Outline the goals (objectives) for your business (using **SMART**), short and long-term.

* **S**pecific
* **M**easurable
* **A**ttainable
* **R**ealistic
* **T**imely

|  |  |
| --- | --- |
| TIMELINE | SHORT TERM GOALS (First Year) |
| Month | OBJECTIVES |
| January |  |
| February |  |
| March |  |
| April |  |
| May |  |
| June |  |
| July |  |
| August |  |
| September |  |
| October |  |
| November |  |
| December |  |

|  |  |
| --- | --- |
| TIMELINE | MEDIUM TERM GOALS (Year 2 and 3) |
| Year 1 | OBJECTIVES |
| Year 2 |  |
| Year 3 |  |
|  | LONG TERM GOALS (Year 4 and 5) |
| Year 4 |  |
| Year 5 |  |

**MARKET DESCRIPTION**

**The Business Environment:**

Outline any factors that may have an impact on your business. Explain whether these factors will create threats and/or opportunities for your venture and why.

* 1. *Demographics:*

i.e. aging population, increasing number of two-income families, increasing/decreasing population, etc.

* 1. *Economy:*

i.e. trends in the inflation rate, average income levels, unemployment levels, general economy of the country or region, etc.

* 1. *Social Trends:*

i.e. increasing concern for the environment, people more interested in exercise and healthy living, etc.

* 1. *Technology:*

i.e. any new technological advances, such as the Internet, that may affect your business either positively or negatively

* 1. *Political:*

i.e. any pending government regulations that could affect your business

**The Competition:**

Competition Profile

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Company Name | Location | Service(s) Provided | Pricing | How do they promote themselves? |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Indicate if the number of competitors is increasing or decreasing and explain why:

Explain how you will compete with your competitors - what will make your business different or more desirable:

**The Target Market:**

Customer Profile(s):

Primary:

Secondary:

**Market Research:**

***Market Survey*** [survey a representative sample of your target market]:

Develop market survey questions (8 – 12 questions), then go out and question people who could be your potential customers. Keep the questionnaire brief - only 8 to 12 questions. Use a variety of questioning techniques, keeping questions fair and free of bias. Ask if the person would use your product or service, how often they would use it and what they would pay for it. Include other questions that will help you determine how best to reach and serve your customers/clients.

***Raw Results:***

Compile your survey results, tabulating the numbers for each response.

***Survey Analysis:***

Using the survey results, prove that a market exists for your product or service. Then project your sales figures for the first year of operation.

**MARKETING STRATEGY**

**Product(s) / Service(s) / Pricing:**

List your products and/or services. Sort your list into appropriate categories, if necessary.

|  |  |
| --- | --- |
| **Product or Service** | **Pricing** |
|  |  |
|  |  |

Outline the credit terms, if any, you will offer to your customers.

List any discounts and/or allowances you will offer to your customers:

**Promotional Plan:**

|  |  |  |
| --- | --- | --- |
| Month | Type of advertising | Cost |
| January |  |  |
| February |  |  |
| March |  |  |
| April |  |  |
| May |  |  |
| June |  |  |
| July |  |  |
| August |  |  |
| September |  |  |
| October |  |  |
| November |  |  |
| December |  |  |

**Location:**

Describe your business location:

Explain the advantages of your location:

If you have not selected a location yet, outline the criteria you will use to select a site:

*Distribution (Manufacturers):*

Explain how you will distribute your product to the end-user (i.e. wholesalers, distributors, retailers, etc.):

List and describe any of the agents who have already agreed to distribute your product (include contracts if applicable in the appendices)

**OPERATIONS**

**Personnel (if applicable):**

* List the job titles (include any owner(s)/manager(s)) of all people to be employed by your business; include any “angel helpers” (friends or family who will work without pay)
* Indicate whether employees are full-time or part-time
* Provide the wage or salary each of the employees will be paid
* If you plan to hire any additional employees within the next year, describe as above

**Advisors (as applicable):**

Professional Services:

Legal

Operations:

Sales:

Administration:

Production:

**Suppliers:**

* List the major suppliers
* List the product(s) and/or service(s) each supplier will sell to you
* List back-up suppliers in case of emergency
* Include any insurance requirements

**Government Regulations:**

* List government regulations (business name registration, Harmonized Sales Tax (HST), Employer Health Tax (EHT), Workplace Safety and Insurance Board (WSIB), employee deductions, etc.), licenses, permits and insurance requirements that pertain to your business
* Indicate whether the items have been addressed
* If applicable, explain proceedings for environmental assessment

**Environmental Statement:**

**FINANCIAL PLAN**

Complete the spreadsheet showing your projected cash flow for the next 12 months of business operations (minimum).

Assets in Place

|  |  |
| --- | --- |
| Asset | Value |
|  |  |
|  |  |
|  |  |
|  |  |

# FINANCIAL SUMMARY OF THE BUSINESS

|  |  |
| --- | --- |
| **PURCHASES TO BE MADE:** | **SOURCES OF FUNDS:** |
| Land |  | Owners Cash Investment |  |
| Buildings |  | Private Lenders |  |
| Building Improvements |  | NSCFDC Loan |  |
| Vehicle |  | Other Lenders |  |
| Machinery & Equipment |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Furniture |  |  |  |
| Inventory |  |  |  |
| Office Equipment |  |  |  |
|  | New  |  |  |  |
|  | Used |  |  |  |
| Operating Expenses |  |  |  |
| Other |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **TOTAL (A)** |  | **TOTAL (B)** |  |

NOTES: Total (A) and (B) must equal.

**Financial Statement Projections:**

* Complete NSCFDC’s spreadsheet showing your projected cash flow for the next 12 months of business operations (minimum). Include “Assumptions” where necessary to explain how all projected amounts were calculated
* Income Statement (separate document)
* Balance Sheet (separate document)

**APPENDICES**

* Owner/management resume(s)
* Owner’s Personal Financial Statement(s)
* Master Business License (or Articles of Incorporation)
* Business Insurance Certificate
* Business mission statement
* Media release samples
* Letters from vendors
* Letters from customers
* Copy of major contract(s) or copy of lease agreement(s)
* Copy of certificates, diplomas, licences, etc. required by owner or personnel
* Drawings/photos/brochures of products and/or services
* Drawings/maps of business location, layout, competitors’ locations, etc.
* Promotional campaign - samples of flyers, advertisements, etc.