

# INDIGENOUS BUSINESS STABILIZATION PROGRAM

## Business Application for additional assistance under Emergency Loan Program

Internal Use	Application received (dd-mm-yyyy)	AFI Staff
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### Section 1: Applicant Information (to be completed by business applicant)

1. Full Name of Owner: _____	
2. Name of Business: _____	Contact Info: _____
3. Amount of previous ELP Loan: \$ _____	Date issued: _____
4. Please provide a detailed description of your need for additional assistance during the COVID-19 crisis, including details of the costs that you wish to cover and whether you have applied for other government or other Bank/Lending assistance:          	

5. List the estimated non-deferrable COVID related expenses your business has/will face to March 31st, 2021.

<b>Estimated Business Costs:</b>		<b>Expected Source of Financing:</b>	
Fixed Operating Costs	\$ _____	Emergency Loan Program (ELP)	\$ _____
Working Capital	\$ _____	Other Government Assistance	\$ _____
Other:	\$ _____		\$ _____
Other:	\$ _____		\$ _____
<b>Total Project Costs:</b>	<b>\$ _____</b>	<b>Total Project Funding:</b>	<b>\$ _____</b>

### Section 3: Signature:

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name of Applicant(s)	
_____	_____
(Print Name)	(Print Name)
_____	_____
(Signature)	(Signature)
Name of Applicant (if the applicant is a Corporation)	
_____	_____
(Print Name)	(Witness Print Name)
I have the authority to bind the Corporation:	
_____	_____
(Signature)	(Signature)