



Application Guidelines

for Community Futures Stream for the Regional Relief and Recovery Fund

Eligibility:

- A "main street" SME (Small, Medium Enterprise) ie. retail shops, restaurants, corner stores, etc., and businesses of strategic importance to the community.
- Small and medium-sized enterprises are defined as having less than 500 employees and annual sales revenue of less than \$20 million, and produce goods and services for the market economy, regardless of their business structure (e.g. sole proprietorships, social enterprises, cooperatives, etc.)
- The applicant has attempted to access other relief federal supports and was ineligible or rejected (including CEBA, and AFI funding).
- The SME must have been viable as of March 1, 2020.
- Established before March 1, 2020.
- Must have been adversely impacted because of COVID-19.
- Effective Date of eligibility March 15, 2020

Repayment Terms:

- 0% interest until December 31, 2022.
- No principal payments until December 31, 2022.
- Principal repayments can be voluntarily made at any time.
- 25% up to a maximum of \$10,000 in loan forgiveness is available, provided the outstanding balance is paid back by December 31, 2022.
- If any part of the balance is not paid by December 31, 2022, the remaining balance will be converted to a term loan at up to 5% annual interest. Effective January 1, 2023.
- The full balance must be repaid no later than December 31, 2025.

Security:

- Promissory Note.

Amount:

- Up to \$40,000.00

Application Checklist:

- Completion of a simplified Application form (attached).
- Applicant provided attestation of funding the organization has applied to and status involving
- Historical financial statements for the last two (2) fiscal
- Articles of Incorporation or Master Business License
- Photocopy or picture of ID for each applicant

To Apply or for more information, please contact:

Krystal Wilson

Business Development Officer

bdo@kdcdc.com

705-567-3331

Jessica Lafreniere

Executive Director

ed@kdcdc.com

705-567-3331

A.1 EMPLOYEE AND FINANCIAL OVERVIEW

A1.1 Number of employees:	# Full Time Jobs	#Part Time Jobs

A1.2 Financial Overview

Based on Your Fiscal Year	Fiscal Year 2020 (If available)	Fiscal Year 2019	Fiscal Year 2018
Total Revenues from all sources (A)			
Total Expenses (B)			
Net Income(A-B)			

A1.3 Status of Current Operation

Since the beginning of the COVID-19 pandemic mid-March, have your current revenues decreased? (compared to the same period last year)	<input type="radio"/> Yes <input type="radio"/> No
If yes, by how much?	\$
Has your business been closed, voluntarily or involuntarily, in response to the COVID-19 pandemic?	<input type="radio"/> Yes <input type="radio"/> No
If yes, when was the business closed? (YYYY-MM-DD)	

B.1 Please provide more detail on how you are experiencing undue hardship due to the impacts of the COVID-19 pandemic? For example, has the outbreak caused your business to record losses or to foresee losses in the near future? Please provide any other details that demonstrate the negative impacts. (i.e. disruption to supply chains)

B.2 Is your organization unable to access sufficient operating line or credit facilities from your existing bank/commercial lender? Yes
 Yes No

B.3.1 The purpose of this funding is to help you bridge a financial gap until recovery. Please provide an overview of how this funding will support your organization during the 6-month period.

B.3.2 What steps are you / will you be taking to ensure long-term sustainability?

B.4. AMOUNT OF FINANCING REQUESTED:	\$
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B5. Please describe how the funds requested will be used in the chart below:

Bridge Support Cost Item	Amount (\$)
1. Commercial Rent / Mortgage	
2. Utilities	
3. Property Taxes	
4. Insurance	
5. Salaries	
6. Bank charges, Interest and Loan Repayments	
7. Professional Fees	
8. Cleaning Supplies	
9. Additional Safety Measures	
10. Vehicle operating expense	
11. Other (please describe)	
+	
-	
TOTAL	

C. HAVE YOU REQUESTED COVID-19 FINANCIAL ASSISTANCE FROM OTHER PROGRAMS*?

Department or Agency	Program Name	Applied? (Yes / No / Not Eligible)	\$ Requested	Application Status (In Progress, Approved, Rejected, Waiting for Decision)
Business Development Bank of Canada and Export Development Canada	Business Credit Availability Programs			
Your financial institution	Canada Emergency Business Account			
FedNor	FedNor Regional Relief and Recovery Fund			
Canada Revenue Agency	Canada Emergency Wage Subsidy			
Canada Revenue Agency	1Temporary Wage Subsidy for Employers			
Service Canada	Work-Sharing Program			
Farm Credit Canada	Credit Line			
Canada Revenue Agency	Canada Emergency Response Benefit			
National Aboriginal Capital Corporations	Aboriginal Financial Institution (AFI) Financing			
Your Landlord	Canada Emergency Commercial Rent Assistance			
NRC-IRAP	Wage Subsidy Program			
Other*+				
+				
-				

*Other federal, provincial, or municipal programs aimed at COVID-19 assistance

C.2 Comment on other COVID-19 funding (if applicable)

D. EQUALITY AND DIVERSITY

D.1 Kirkland & District Community Development Corporation/ Société de développement Communautaire is committed to equality and diversity so that all Canadians have the opportunity to participate in and contribute to the growth of the economy. If your organization does not meet the definitions or you do not wish to declare your status, leave the fields blank.

	Is your business owned or majority owned by one or more of the following under-represented groups	
Women	<input type="radio"/> Yes	<input type="radio"/> No
Indigenous Peoples	<input type="radio"/> Yes	<input type="radio"/> No
Visible Minorities	<input type="radio"/> Yes	<input type="radio"/> No
Youth	<input type="radio"/> Yes	<input type="radio"/> No
Persons with Disabilities	<input type="radio"/> Yes	<input type="radio"/> No
LGBTQ2+	<input type="radio"/> Yes	<input type="radio"/> No
Members of Official Language Minority Communities	<input type="radio"/> Yes	<input type="radio"/> No

E. CERTIFICATION

On behalf of the Applicant, I hereby acknowledge and/or certify that:

- (a) I have authority to submit this application on behalf of the Applicant and evidence of this authority will be provided upon request.
- (b) I confirm that the Applicant is current on all obligations to the federal government; that the execution of the proposed project will not prevent the Applicant from continuing to meet these obligations and from maintaining the economic benefits anticipated by the other agreements; and that these obligations will not preclude the Applicant from fulfilling its obligations under the proposed project.
- (c) The Applicant is under no obligation or prohibition, nor is it subject to, or threatened by any actions, suits or proceedings, which could or would affect its ability to implement this proposed project.
- (d) The information provided herein is complete, true and accurate and I undertake to provide any further information that may be required for Kirkland & District Community Development Corporation/ Société de développement Communautaire to render a decision in a timely manner.
- (e) I confirm that the funding requested in section B.5 above was not eligible for, or supported by, other COVID 19 financial assistance.
- (f) By submitting this application, I certify that Kirkland & District Community Development Corporation/ Société de développement Communautaire is required in order for the project to proceed, and agree that Kirkland & District Community Development Corporation/ Société de développement Communautaire may make the enquiries it deems necessary to evaluate the application.
- (g) That there has been no material adverse change in the financial position or operations of the Applicant since _____, being the end of the last fiscal year of the Applicant for which a balance sheet and a profit and loss statement have been furnished.
- (h) That the Applicant will be responsible for payment of all charges relative to preparation, execution and registration of such documents as may be required by the Corporation or its solicitors
- (i) That the statements made herein are for the express purpose of obtaining financing Kirkland & District Community Development Corporation/ Société de développement Communautaire and are to the best of the Applicant's knowledge and belief true and correct. The Applicant understands that additional information in support of this application must be supplied to the Corporation, if requested, before adequate consideration can be given to this application. The Applicant realizes that any present or future indebtedness of the Applicant, or the Applicant's business, to the Corporation may become due and payable if any information provided by the Applicant to the Corporation proves to be inaccurate or incomplete.
- (j) That in applying for this financing and, in the event that the Corporation approves such application, the Applicant's personal and confidential business information will be requested from the Applicant and/or collected from third parties that have information about the Applicant's business and personal financial status for the purposes of determining the Applicant's eligibility for financing and reporting to Industry Canada.

F. Disclosure, Release and Waiver of Liability

- a) The Applicant acknowledges that he or she is solely responsible for the success or failure of his/her business, and that any information that is provided to the Applicant by representatives of the Corporation is for the Applicant's understanding only. It is the Applicant's responsibility to verify the accuracy of such information or to seek additional information concerning any aspects of the Applicant's proposed business.
- b) The Applicant further agrees to hold the Corporation harmless and hereby releases and discharges the Corporation from any actions, damages, claims or demands which may arise, directly or indirectly, as a result of any act or omission by the Corporation in providing information to the Applicant, and to indemnify the Corporation from any such actions, damages, claims or demands which might be suffered by the Applicant's business or any guarantor in connection with any such information.
- c) The Applicant acknowledges that, as the operation of the Corporation is financially supported by the Government of Canada, representatives of Industry Canada are permitted access to the files of the Corporation for monitoring and evaluation purposes and that the Applicant may be contacted by representatives of Industry Canada and that, such information as is acquired by the Ministry will be treated as confidential.
- d) The Applicant acknowledges receipt of the Corporation's Privacy Statement and hereby consents to his or her personal and business information being collected, used, retained, and disclosed by the Corporation for the limited purposes as set out above. The Applicant further understands that under Federal privacy law, he or she has access to the information held by the Corporation and knows to refer to the Corporation's Privacy Policy or contact the Chief Privacy Officer if a question or concern arises about the handling of the Applicant's personal information.

Submitting Your Application:

To submit your proposal for funding, please email the completed application and supporting documentation (see checklist below) to bdo@kdcadc.com. Once your application has been received by in the Kirkland & District Community Development Corporation/ Société de développement Communautaire, you will receive a confirmation email within 1 business day. Please ensure you have correctly noted your contact information on this form.

Name	Title
Name of Officer with Signing Authority for the business	Date (YYYY-MM-DD)

DISCLOSURE AND RELEASE STATEMENT

To: The Kirkland & District Community Development Corporation (the "Corporation")

1. I, hereby certify that the information in this Statement of Personal Assets and Liabilities is a complete and true declaration. The property values shown above are the fair market values of the properties and the amount of debts is the total potential indebtedness (inclusive of any other loans, credit cards, or other debts for which I have signed as a guarantor).
2. I confirm that if any statement I have made herein or in accompanying materials proves to be incorrect in any way, I shall notify the Corporation immediately.
3. I authorize the Corporation to obtain personal credit information about me from any source. By executing this statement, I acknowledge as notice in writing, the Corporation's intent to obtain this information and I authorize each source to provide this information to the Corporation.
4. I understand and agree that in order to perform a credit investigation, I need not provide my Social Insurance Number ("SIN") if I can provide alternative identification that is acceptable to the credit reporting agencies. If I do provide my SIN, I consent to the Corporation using this information for the limited purpose of performing a credit investigation.
5. I authorize the Corporation to retain this Statement of Personal Assets and Liabilities and any financial records, credit and reference reports for the Corporation's records and reporting to Industry Canada who oversees the Community Futures Program.
6. I confirm receipt of the Corporation's *Privacy Statement* and understand and consent to the Corporation collecting, using, retaining and disclosing the information contained in this Statement of Assets and Liabilities for the limited purpose of determining my eligibility for financing as is required by law, and by Industry Canada. I understand that the Corporation will handle my personal information in strict confidence in accordance with Federal privacy law as set out in the Corporation's *Privacy Policy*. If I have any questions or concerns about the management of my information, I may refer to the *Privacy Policy*, available at www.grenvillecfdc.com or contact the Chief Privacy Officer.

Yes or No

- I am currently the subject of litigation before a court, tribunal, government board or agency, or there is a threat of such litigation. There are unexecuted judgment(s) registered against me, such as:
_____.
- I have made an assignment or have been petitioned into bankruptcy; there are writs registered against my name. If yes, provide details: -
_____.
- I certify that I am a Canadian Citizen or Landed Immigrant.

DATED AT _____ THIS _____ DAY OF _____, 20_____

Witness

Signature of Applicant

Witness

Signature of Spouse