



Post Covid Professional Services Relief

CFDC Post Covid Professional Services Relief
Projects should reflect one of the following priorities:
<ul style="list-style-type: none">• Business planning• Business Development• Professional Consultations• Financial processing set up / training
Eligibility:
<ul style="list-style-type: none">• A 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.• SME was Established before March 1, 2020.
Examples of Eligible Services acquired after March 15, 2020:
<ul style="list-style-type: none">• Feasibility Studies• Financial Assessments• Financial Training• Business Planning Consultations• Business Development Consultations• Marketing Consultations• Industry Expertise Training• Other Professional consultations
Funding is eligible until March 31 2021
Up to \$5,000.00 will be granted to the SME applicant to be issued to a third-party delivery agent, training consultant or independent service provider for eligible services. Funding will be issued on a continuous intake model to ensure funds are disbursed as quickly as possible.
<i>Complete attached application and submit to</i>



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Applicant and Contact Information			
Legal Name of Applicant:			
Business Name:			
Business Number:			
Ownership Type:			
Business Sector:			
Provide a Description of Your Business:			
Street Number:	Unit Number:	P.O. Box Number:	Province:
City:		Postal Code:	Business Telephone Number:
Fax Number:		E-mail:	
Last Name of Authorized Contact:		First Name of Authorized Contact:	
Title:		Business Telephone Number:	
E-mail:		Do You Wish to Self Identify With Regards to the Following:	
		<input type="checkbox"/> Women <input type="checkbox"/> Indigenous <input type="checkbox"/> Visible Minorities <input type="checkbox"/> Youth <input type="checkbox"/> Persons with disabilities <input type="checkbox"/> LGBTQ2+ <input type="checkbox"/> Members of Official Language Minority Community	



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Project Information			
Please Provide a Brief Description of the Professional Services you Require:			
How will these Services Impact your Business Recover After the Initial Announcement of the State of Emergency Declared in Ontario on March 15, 2020?			
Will there be an Increase in Jobs/ if so, how Many?	Will these Services Assist in the Maintenance of Jobs? If so how many?	Anticipated Start Date:	Anticipated Completion Date:
Type of Service that will be or has been Provided (ie. Workshop, Consultation, Software, Training):			
Will this Service Lead to Your Business Being? (Check all that apply) <input type="checkbox"/> Expanded <input type="checkbox"/> Modernized <input type="checkbox"/> Maintained			
Name of Business Services will be Provided From:		Telephone Number of Service Provider:	
Email address of Service Provider Contact:		Website of Service Provider:	
Address of Service Provider:			
Cost of Services:			
Please Provide Invoice / Proof of Payment of Services with Application			



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Applicant Signing Authority	
<i>By signing below, I am acknowledging the information that is provided is true and accurate to the best of my knowledge</i>	
Signature of Applicant:	Date:
To Be Completed by CFDC	
Name of Individual Reviewing Application:	Signature:
CFDC Name:	Application Number:
Recommendation:	Date:
HOST CFDC ONLY	
Administration initials:	Cheque Number:
Initials of signing authority one:	
Initials of signing authority two:	