

PIIKANI NATION

2022-2023 GRANT EQUITY APPLICATION FORM



A. Applicant Information

Purpose for application for a small business grant:

| | | | | | | | | | |
|--------------------------|--------------|--------------------------|-------------------|--------------------------|--------------------|--------------------------|--------------------|--------------------------|-------|
| <input type="checkbox"/> | New Business | <input type="checkbox"/> | Existing Business | <input type="checkbox"/> | Business Expansion | <input type="checkbox"/> | Youth Entrepreneur | <input type="checkbox"/> | Elder |
|--------------------------|--------------|--------------------------|-------------------|--------------------------|--------------------|--------------------------|--------------------|--------------------------|-------|

| | | | | | |
|----------------------|--|-----------------|------------|--------|--|
| Date of Application: | | | Treaty #: | | |
| Last Name: | | Middle Initial: | | First: | |
| Address: | | | City/Town: | | |
| Province: | | Postal Code: | | Email: | |
| Phone Number: | | Cell: | | Other: | |

How did you learn about the Piikani Grant Equity Program? (Check all that apply)

| | | | | | | | |
|--------------------------|---------------------|--------------------------|--------------|--------------------------|---------------|--------------------------|------------------|
| <input type="checkbox"/> | Print Advertising | <input type="checkbox"/> | Social Media | <input type="checkbox"/> | Word of Mouth | <input type="checkbox"/> | Business Contact |
| <input type="checkbox"/> | Past/Current Client | <input type="checkbox"/> | PRDL Website | <input type="checkbox"/> | Other Website | <input type="checkbox"/> | Other: |

| | |
|---|--|
| Have you previously applied for a small business grant, through the Piikani Grant Equity Program? | |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| If you marked yes: | |
| Year(s) of application: | |
| Business Type: | |
| Business Name: | |
| Is this business still in existence? | |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| If yes, please describe: | |
| | |

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Have you taken small business training or can demonstrate business knowledge?

YES NO

If yes, please attach certificate, degree, diploma, etc.

Have you previously been awarded a grant through the Piikani Nation Grant Equity Program?

YES NO

If you marked yes:

| | |
|-------------------------|--|
| Year(s) of application: | |
| Business Type: | |
| Business Name: | |

B. Business Information

Is the business mailing address the same as the applicants mailing address?

YES NO

If different please indicate:

| | | |
|----------------------|---------------|------------|
| Business Phone: | Business Fax: | Website: |
| Number of employees: | Full-Time: | Part-Time: |

What is your Business Structure?

| | | |
|---------------------|-------------|-------------|
| 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 | Both |
|--|---|------|

Business Name:

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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.) (Please give a brief description)

A large, empty rectangular box with a black border, intended for the applicant to provide a brief description of their project, target market, and competitors.

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

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B.2. Estimated or Continuing Project Costs and Financing/Funds

| Project Costs | \$ | Project Financing/Funds | \$ |
|--|-----------|--|-----------|
| Capital (Assets) | | Applicant Cash Equity | |
| Building | | Piikani Grant Equity Program | |
| Land | | | |
| Equipment | | Commercial Financing (specify below) | |
| Inventory | | | |
| Other (specify below) | | | |
| | | | |
| Total Capital | | Total Commercial Financing | |
| | | | |
| Operating (Expenses) | | Other Gov't Financing (specify below) | |
| Rent | | | |
| Utilities | | | |
| Insurance | | | |
| Employees | | Total Government Financing | |
| Marketing | | | |
| Networking | | Other Financing (specify below) | |
| Business Planning | | Ex. Awards | |
| Business Support | | | |
| Sweat Equity | | | |
| Registration/License | | | |
| Other (specify below) | | | |
| | | | |
| Total Operating | | Total Other Financing | |
| | | | |
| Total Estimated/Continued Project Costs | | Total Estimated/Continued Project Financing/Funds | |

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

| | |
|-------------------------------------|--|
| Piikani Grant Equity Program | |
| Grant Request Amount: | |

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Documentation Requirements Checklist

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

(√)

| | |
|--|---|
| | <p>Business Plan To include:</p> <ul style="list-style-type: none"> - Marketing Plan - Financials |
| | <p>Proof that the business is owned by a Piikani Nation Member.</p> <ul style="list-style-type: none"> - Copy of Status Card, and where required a copy of the articles of incorporation and partnership agreement. - Copy of BCR - Copy of Business License |
| | <p>A copy of the projected timeline and budget from the beginning to end and milestone dates of the business/project/initiative – If separate document: NOTE: A report must be completed and submitted to Piikani Resource Development Ltd. on the business/project/initiative by March 31, 2023.</p> |
| | Resume of Owner(s) |
| | Proof the applicant has contributed equity to the business |
| | Copies of quotes from the suppliers |
| | Samples of Marketing |
| | Entrepreneur Training Certificate and/or equivalent |
| | Read and understand the Program Policy |

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

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Acknowledgment & Release

I, _____ declare that the information on this grant equity application form to the best of my (our) knowledge 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, AB T0K 0H0

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

Fax: (403) 965-2626

Email: gep@prdl.ca

Program policy & upcoming training and events:

Website: <http://www.prdl.ca/economic-development.html>

LinkedIn: <https://www.linkedin.com/in/prdl/>

Facebook Friend: Piikani PRDL

Facebook Page: Piikani Resource Development Ltd.

Twitter: @piikanirdl