

# Indigenous Business Stabilization Program

Business Application for Additional Assistance under Emergency Loan Program (ELP)



Internal Use	Application Received (dd-mm-yyyy)	CCDF 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: \_\_\_\_\_  
Approved by CCDF

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 31, 2021

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

## Section 2: Signature

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

Name of Applicant(s)

Name of Applicant (if a Corporation)

\_\_\_\_\_  
 (Print Name) (Print Name) (Print Name) (Print Name)

\_\_\_\_\_  
 (Signature) (Signature) (Signature) (Signature)