

Business Plan Template - Entrepreneurial Stream

New Brunswick Provincial Nominee Program (NBPNP)



APPLICANT INFORMATION	
Family name(s) exactly as shown on your passport or travel document	Date of birth (mm-dd-yyyy)
First name(s) exactly as shown on your passport or travel document	PNP# or INB#
Middle name(s) exactly as shown on your passport or travel document	Passport number

BUSINESS PROFILE					
Complete all applicable sections of this profile					
Company Name			Trade name		
Mailing address					
PO Box	Unit	Street no.	Street name	City/Town	Postal code
Physical address					
Unit	Street no.	Street name		City/Town	Postal code
Telephone		Mobile		Email	
Website					
Purchase or start-up		Business structure		Total investment (CDN funds)	
				\$	
Industry sector		SNB Corporate registry no.		Registry date (mm-dd-yyyy)	
				Start of operation date (mm-dd-yyyy)	

BUSINESS OWNERSHIP AND MANAGEMENT				
Complete all applicable sections of this profile				
Name (LAST, first)	Job title	Responsibilities	% owned	Relationship to Applicant

DESCRIBE THE BUSINESS

DESCRIBE HOW YOUR BUSINESS/MANAGEMENT EXPERIENCE WILL BENEFIT YOUR BUSINESS

How many years have you been in this sector? What is your experience? What are your qualifications, strengths and weaknesses?

DESCRIBE YOUR RESPONSIBILITIES AS THE BUSINESS OWNER

EXPLAIN WHY YOUR BUSINESS PLAN WILL BE EFFECTIVE

LIST YOUR THREE MOST IMPORTANT SHORT TERM (1 TO 3 YEARS) BUSINESS GOALS	
1	
2	
3	

LIST YOUR THREE MOST IMPORTANT LONG TERM (3 TO 5 YEARS) BUSINESS GOALS	
1	
2	
3	

GEOGRAPHIC MARKETS SERVED BY YOUR BUSINESS		
Specific location(s)	Strengths	Weaknesses

MARKET TRENDS	
Trend	Business response

CUSTOMERS

Describe your primary customers

Why do your customers need and want your product/service?

What steps will you take to retain your customers?

PRODUCT/SERVICE

Describe your product(s)/service(s)

How are you going to get your product/service to your customer?

PRICING

What is the current price for your range of product/service?

What is the competition charging?

What is the total cost of producing the product or delivering the service?

INDUSTRY REGULATIONS, PERMITS AND LICENSES	
Federal, Provincial and/or Municipal policy	Regulation, permit and/or license required

REQUIREMENTS FOR A REGULATED INDUSTRY (if applicable)	
Obligation	Business response

INSURANCE PLAN	
Type(s) of insurance needed	Approximate cost

PRIMARY SUPPLIERS			
Company name	Product/service	Location	Years in business

COMPETITION				
Who are your top five competitors?				
Name and location	% market share	Product/service	Strengths	Weaknesses

MARKETING PLAN

Describe your marketing plan

Identify advertising and promotional activities	Expected outcome	Approximate Cost (CAD\$)

What is your unique selling position?

SALES PLAN

Describe your sales plan (i.e. team, techniques, prices, etc.)

Sales and distribution channels

Channel	Product/services	% of sales	Strengths	Weaknesses

RESOURCE REQUIREMENTS

Briefly describe your resource requirements

Location analysis

Details	Description	Strengths	Weaknesses
Physical location			
Exterior of premises			
Interior of premises			
Size of exterior space			
Size of interior space			
Parking			
Traffic			

Equipment analysis

Key equipment	Description	Purpose	Purchasing cost (CAD\$)	Operating Cost (CAD\$)

Materials and supplies analysis

Key materials and supplies	Description	Purpose	Quantity	Unit cost (CAD\$)	Annual cost (CAD\$)

Technology analysis

Key items	Description	Purpose	Quantity	Unit cost (CAD\$)	Annual cost (CAD\$)

OPERATIONS PLAN			
	Description	Strengths	Weaknesses
Physical address			
Business hours			
Business premises			
Work schedule for you and your staff			
Acceptable forms of payment for products or services			
Warranties			
Refund policies			
Quality assurance initiatives			

Environmental issues			
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HUMAN RESOURCES STRATEGY

Employer responsibilities and obligations	
NB Acts and Regulations	Brief summary of employer responsibilities and obligations
<i>Employment Standards</i>	
<i>Human Rights</i>	
<i>Occupational Health and Safety</i>	
WorkSafe NB	

Personnel plan (for non-family members)

Job title	Qualifications	Responsibilities	# positions	Annual Wage (CAD\$)	Total Wages (CAD\$)
Total wage					

Identify and describe employee recruitment options

List training requirements

START UP COSTS				
Eligible Investment	Purchase Amount (CAD)	Max. Eligible Amount (CAD)	Source for the Cost	Maximum Amount Allowable toward
Current Assets				
Raw Materials, Components, Parts				50% of total eligible investment
Initial Inventory				50% of total eligible investment
Fixed Assets				
Building and/or Land (purchase)				25% of total eligible investment
Improvement for Purchased Building				25% of total eligible investment
Leasehold Improvements				25% of total eligible investment
Equipment & Machinery & Tools				
Vehicle for Business				5% of your total eligible investment or \$15,000, whichever is lower
Furniture				
Intangible Assets				
Franchise Fees				
Goodwill (purchase an existing business)				10% of net book value of the business
Other Eligible Investment				
Professional Fees (including marketing, promotion, services in connection with establishing the business)				4% of your total eligible investment or \$10,000, whichever is lower
(A) Total Eligible Investment (min \$250,000 CAD before taxes)				
Ineligible Investment				
Cash (working capital)				
Deposit				
Insurance				
Rentals				
Salary/Wage + Benefits				
Utilities				
(B) Total Ineligible Investment				
(C) Total Investment = (A) + (B)				

FORCASTED INCOME STATEMENT				
		Year 1	Year 2	Year 3
(1)	Revenue/sales			
(2)	Cost of goods sold			
(3)	Income from sales [(1) – (2)]			
	Gross margin % (gross income / revenue)			
	Expenses			
	Wages			
	Benefits			
(4)	Total expenses			
(5)	Gross income [(3) – (4)]			
(6)	Income tax [(5) x (tax rate)]			
(7)	Net income [(5) – (6)]			

NOTES: Income statement	
Item	Explanation for the value
Revenue	
Cost of goods sold	
Depreciation and amortization method for fixed assets	
Wages and benefits (monthly cost of)	

FORCASTED BALANCE SHEET				
	Start-up	Year 1	Year 2	Year 3
(1) Current assets				
Total current assets				
(2) Fixed assets				
Total fixed assets				
Total assets [(1) + (2)]				

(3) Current liabilities				
Total current liabilities				
(4) Long term liabilities				
Total long term liabilities				
Total liabilities [(3) + (4)]				
(5) Owner's equity				
Paid in capital (\$250,000+)				
Retained earning				
Total owner's equity				
Total liabilities and owner's equity [(3) + (4) + (5)]				

NOTES: If you have long term liability in addition to the \$250,000 CAD investment, explain why

Economic benefit to New Brunswick	
Benefit	Explanation
Is the business in a strategic economic sector?	
Will the business include a value added process in New Brunswick, and increase export?	
Will the business create at least one job in National Occupation Code O or A for a permanent resident or Canadian citizen, not including family?	
Will the business create at least two jobs in National Occupation Code B, C or D for a permanent resident or Canadian citizen, not including family?	
How much of the \$250,000 investment will be invested in fixed assets?	
Do you have a five year plan for the business?	
How will the business link New Brunswick to global markets?	

APPLICANT DECLARATION

I, _____, do solemnly declare that I am fully aware of the contents of this business plan. I understand that upon being granted permanent resident status by Canada I must make a genuine effort to establish the Business as per this plan. I understand that I may be asked to provide additional information, and to defend any position or assumption included in this plan. I understand that any information provided by PGD or the Province, related to this plan is intended for informational and educational purposes only and does not constitute specific advice regarding the establishment or purchase of a business in New Brunswick or provide specific individual advice about matters relating to the Business including, but not limited to, human resources, investment, insurance, financial, legal, accounting, tax or similar matters. I understand all the above information, having had the opportunity to ask for or having asked for and obtained an explanation on every point which was not clear to me.

Signature of applicant

Date (mm-dd-yyyy)

Personal information on this form is collected under the authority of the *Immigration and Refugee Protection Act*, SC 2001 c.27. The purpose of the collection is to process your application for the New Brunswick Provincial Nominee Program (NBPNP). The information will be used for research, performance measurement and/or evaluation of the Program. If you have any questions about the collection and handling of personal information you may contact the Director of Immigration Services, Government of New Brunswick, P. O. Box 6000, Fredericton, New Brunswick, Canada, E3B 5H1.

Email: es-ve@gnb.ca; Website: www.welcomenb.ca.