



## Your Conexus Credit Union Business Planner



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## Conexus Credit Union Business Planner

This tool can help your business succeed by assisting you to analyze your business strategy, the market that you operate in, and your financial plan. At the same time, it will help us to better understand your business, your goals, and the role that your credit union can play in helping you achieve them. The process is simple. Either print out the business plan and fill it in by hand, or take advantage of our interactive form and complete the PDF document online. In this case, please ensure that you have carefully read the instructions provided, explaining how to save and reload your document.

Then, when you are finished, either fax, or drop it off at our nearest branch. If you would like one of our Agricultural Relationship Managers to review your business plan, they would be happy to do so.

# 1.0 Your Business Profile



Please describe what your business does and the environment that your business operates in. Along with your business strategy, this will help you, as well as us, gain a better understanding of the factors important to the success of your business. If you require more space, please feel free to attach additional pages.

## 1.1 YOUR BUSINESS

### Details

Registered Business Name			
Business Operating Name			
Business Address			
Mailing Address			
Telephone		Facsimile	
Cellular			
Email			
Website			
Date Established		Current Ownership Since	

#### Form of business (choose one)

<input type="checkbox"/> Corporation	<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> Co-operative	<input type="checkbox"/> Incorporated association
<input type="checkbox"/> Partnership	<input type="checkbox"/> Society	<input type="checkbox"/> Other	

#### Type of Operation (choose one)

<input type="checkbox"/> Grain	<input type="checkbox"/> Mixed	<input type="checkbox"/> Other
<input type="checkbox"/> Cattle		

#### Current financial institution(s)

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### Individual owners

Legal Name			
Business Name			
Title			
Business Involvement	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	

**Accountant**

Name | \_\_\_\_\_  
Address | \_\_\_\_\_  
Telephone | \_\_\_\_\_ Facsimile | \_\_\_\_\_  
Email | \_\_\_\_\_  
Fiscal Year End | \_\_\_\_\_

**Lawyers**

Name | \_\_\_\_\_  
Address | \_\_\_\_\_  
Telephone | \_\_\_\_\_ Facsimile | \_\_\_\_\_  
Email | \_\_\_\_\_

**1.2 BUSINESS ENVIRONMENT**

**Suppliers**

1 Name | \_\_\_\_\_  
Address | \_\_\_\_\_  
2 Name | \_\_\_\_\_  
Address | \_\_\_\_\_  
3 Name | \_\_\_\_\_  
Address | \_\_\_\_\_  
4 Name | \_\_\_\_\_  
Address | \_\_\_\_\_

Have you negotiated terms with these suppliers?

\_\_\_\_\_  
\_\_\_\_\_

**Products and Services**

Is there anything that makes your product and service unique (i.e. your competitive advantage)?

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**1.3 OPERATING PLAN**

**Financing Requirements**

What type of financing do you require?

<input type="checkbox"/> Operating line of credit/overdraft protection	<input type="checkbox"/> Equipment loan or lease
<input type="checkbox"/> Loan for real estate	<input type="checkbox"/> Credit card(s)
<input type="checkbox"/> Other	

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## 2.0 Your Personal Information

Along with your business, it is important to understand your own financial strengths.

This will help determine the right financial strategy to meet your business needs. Please include the value of your spouse's assets in the personal financial statement below.





Name

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Education and qualifications

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Applicable skills and/or trades

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Employment history

1 

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2 

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3 

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4 

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Personal reference(s)

1 **Name** | 

---

 | **Title** | 

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Company | 

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Address | 

---

Telephone | 

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2 **Name** | 

---

 | **Title** | 

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Company | 

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Address | 

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Telephone | 

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3 **Name** | 

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 | **Title** | 

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Company | 

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Address | 

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Telephone | 

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**2.1 PERSONAL FINANCIAL STATEMENT**

<b>CASH &amp; OTHER LIQUID ASSETS</b>	<b>Type</b>	<b>Deposited With</b>	<b>Account No.</b>	<b>Pledged</b>	<b>Value</b>
Identify Asset listed by TYPE: Cash, GIC; RRSP; Stock, Bonds; Mutual Funds, Other  Indicate under "Pledged" if an Asset has been Pledged as loan Security					
				<b>TOTAL VALUE</b>	

**Listing of Other Assets (Personal)**

<b>OTHER ASSETS</b>	<b>Describe (Art, Boat, Business, Investment, etc.)</b>	<b>Value</b>
		<b>TOTAL ASSETS</b>

**Listing of Assets (Miscellaneous)**

<b>Accounts Receivable</b>		<b>Supplies</b>	
Deferred Grain Tickets		Fuel on Hand	
Deferred Cattle Tickets		Chemical on Hand/Applied	
CWB Final Tickets		Fertilizer on Hand/Applied	
Crop Insurance		Livestock Supplies	
Other		Other	
Other			
Other			
Other			

**Listing of Equipment**

Manufacturer	Model	Year	Condition	Serial Number	Value
				<b>TOTAL VALUE</b>	



**Listing of Real Estate**

Legal Description / Address	Total Acres	Cult Acres	Year Purchased	Rm #	Taxes	Paid	Assessed Value	Estimated Value
<b>TOTAL VALUE</b>								



**Listing of Grain And Feed on Hand**

Crop Type And Grade	Measure (Bu/Lbs)	Quantity	Per Unit Value	Bushels For Feed	Estimated Value
				TOTAL VALUE	

**Listing of Livestock on Hand**

Market Livestock Inventory On Hand				Breeding Livestock Inventory On Hand		
TYPE	Number	Beginning Inventory Weight	Price/Hd	TYPE	Beginning Inventory Number	Beginning Inventory Price/Hd

**Listing of Insurance**

	Amount	Insurer	Agent		Phone
FIRE INSURANCE					
	Amount	Insurer	CSV	Beneficiary	Pledged?
LIFE INSURANCE					

**Liabilities**

**Listing Of Accounts Payable**

Please list ACCOUNTS PAYABLE carried over from previous year (such as tax arrears, cash advance, Crop Ins, premiums, suppliers / retailers etc)

Creditor	Interest Rate	Balance Owing	Dates Due

**Listing Of Revolving Credit And Short Term Loans**

Please list Loans Less than 1 year (Include Lines of Credit, Revolving Credit and Credit Cards)

Creditor	Interest Rate	Balance Outstanding	Pmnt Amt & Freq (Mth; S/A; Ann)	Date Pmnts are Due	Arrears (If Any)
<b>TOTALS</b>					



**Listing Of Intermediate Loans**

Please list Loans UNDER 10 YEARS					
Creditor	Interest Rate	Balance Outstanding	Pmnt Amt & Freq (Mth; S/A; Ann)	Date Pmnts are Due	Arrears (If Any)
<b>TOTALS</b>					

**Listing of Long Term Loans**

Please list Loans OVER 10 YEARS					
Creditor	Interest Rate	Balance Outstanding	Pmnt Amt & Freq (Mth; S/A; Ann)	Date Pmnts are Due	Arrears (If Any)
<b>TOTALS</b>					

<b>Total Assets</b>	(\$	)	<b>LESS Total Debts</b>	(\$	)	<b>= Net Worth</b>	\$
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Have you co-signed or guaranteed any other liabilities?

Yes (please describe below)  No

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Do you or your spouse receive income from any sources outside of the business?

Yes (please describe from where and how much below)  No

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Is this income expected to continue?

Yes  No

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Have you every declared bankruptcy?

Yes (Please provide details below)  No

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Are there any outstanding legal actions against you or your spouse?

Yes (Please provide details below)  No

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Have you ever made a consumer proposal or Assignment in Bankruptcy?

Yes (Please provide details below)  No

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Have you ever had a consolidation order issued by Orderly Payments of Debts?

Yes (Please provide details below)  No

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Have you had an asset repossessed/foreclosed upon or given title in lieu thereof?

Yes (Please provide details below)

No

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Are you obligated to pay Alimony, Child Support or Separation Maintenance?

Yes (Please provide details below)

No

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Are you a co-signer, guarantor or endorser for any loans?

Yes (Please provide details below)

No

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Do you owe any monies to a Revenue Canada agency prior to current year?

Yes (Please provide details below)

No

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Do you owe any Property Tax prior to current year?

Yes (Please provide details below)

No

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Are you a party to any claims or lawsuits?

Yes (Please provide details below)

No

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Are you a party in any litigation proceeding now in course or pending?

Yes (Please provide details below)

No

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## 3.0 Your Financial Plan

This section will help you prepare the financial component of your business plan by guiding you through a Business Balance Statement, a Business Income Statement, and a Business Cash Flow Forecast. If you already have financial plans for your business please disregard this section and submit the most current statements separately to your nearest branch. If you are starting your business, please fill in only the Cash Flow Forecast section.



**3.1 FARM INCOME STATEMENT**

An income statement outlines your revenue, expenses and profits over a defined period. If you are in the process of beginning your business, please estimate these on a quarterly basis. If your business is already established, please attach income statements for the previous three years, or alternatively, fill in the statement below for the past three years.

	Q1 or Year 20	Q2 or Year 20	Q3 or Year 20	Q4 or Year 20	Annual Totals (if applicable)
<b>INCOME</b>					
Grain sales	\$	\$	\$	\$	\$
CWB payments					
Forage sales					
Other crop income					
Market livestock sales					
Breeding stock sales					
Livestock product sales					
Other livestock sales					
Custom work					
Rental or share income					
Government payments and rebates					
Subsidies					
Gov't equity programs earned					
Crop and/or hail insurance payouts					
Other Gov't payments					
Other insurance proceeds					
Interest earned					
Patronage payment					
Other					
<b>Total Farm Cash Income</b>	\$	\$	\$	\$	\$

EXPENSE	Q 1	Qtr 2	Qtr 3	Qtr 4	Annual Totals
Seeds and cleaning	\$	\$	\$	\$	\$
Fertilizer and chemicals					
Hail and crop insurance premiums					
Gov't program premiums					
Machinery repairs and maintenance					
Fuel, oil and grease					
Equipment rental and lease payments					
Shop supplies and small tools					
Feeder livestock purchases					
Livestock feed and supplements					
Livestock supplies, vet fees and drugs					
Breeding charges					
Trucking and marketing					
Breeding stock purchases					
Land rental					
Property taxes					
General insurance and licenses					
Building and fence repairs					
Utilities					
Hired labour					
Accounting, legal and office					
Banking charges and interest					
Other					
<b>Total operating expenses</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Operating profit</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
Minus: Taxes payable					
Minus: Owner's salary/dividends					
Minus: Depreciation					
Minus: Other					
<b>Subtotal</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Net Income</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

**3.2 FARM PROJECTION**

A cash flow forecast shows your estimated sources of business revenue and your projected business expenses on a monthly basis over the course of one year. If you are starting a new business, please project the following information for the next 12 months.

<b>CASH INFLOW</b>	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
Accounts Receivable	\$	\$	\$	\$	\$
Crop Sales					
Livestock Sales					
Other Farm Income	\$	\$	\$	\$	\$
Government Payments and Rebates	\$	\$	\$	\$	\$
New Borrowings					
Capital Sales					
Net Nonfarm Income					
<b>Total Cash Inflow</b>	\$	\$	\$	\$	\$
<b>CASH OUTFLOW</b>					
Seeds and Cleaning	\$	\$	\$	\$	\$
Fertilizer and Chemicals					
Hail and Crop Insurance					
Machinery and Equipment Repairs					
Fuel, Oil and Grease					
Feeder Livestock Purchases					
Livestock Feed and Supplement					
Livestock Supplies, Veterinary Fees and Drugs					
Breeding Stock Purchases					
Land Rent					
Property Taxes					
Insurance and Licenses					
Building and Fence Repairs					
Utilities					
Hired Labour					
Accounting and Legal Fees					
Family Living Allowance					
Income Tax (farm portion)					
Purchase of Capital Asset	\$	\$	\$	\$	\$

Debt Repayment (principal and interest)	\$	\$	\$	\$	\$
<b>Total Cash Outflow</b>	\$	\$	\$	\$	\$
<b>SUMMARY</b>					
Surplus(Deficit)					
+Previous Ending Balance (Opening Balance)					
= Net Cash Balance					
- interest on Operating Loan					
<b>=Ending Cash Balance</b>	\$	\$	\$	\$	\$

Where do you expect your business to be in one year?

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Three years?

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Five years?

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**Congratulations!**

You have now completed your Business Plan. If you would like to forward this to your Ag Relationship Manager, please print this document and either fax it to, or drop it off at your local Conexus Credit Union. We would be happy to meet with you, and discuss your business plan and your needs!

Name of Applicant: \_\_\_\_\_ Phone # (Optional) \_\_\_\_\_

Social Insurance Number: (Optional) \_\_\_\_\_ Birth Date: \_\_\_\_\_

Business Name: (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

### Consent for Collection and Use of Information

I understand and acknowledge that the Credit Union will be collecting and gathering personal, financial and credit information from and about me (Information) to:

- (i) obtain credit reports and evaluate my credit rating and credit worthiness;
- (ii) determine my financial situation and make decisions about loan or credit applications;
- (iii) administer, monitor and service my account and collect my loan;
- (iv) administer and manage security and risk in relation to my loan and any of my accounts and the financial services provided to me;
- (v) comply with legal, security and regulatory requirements;
- (vi) assist in dispute resolution;
- (vii) understand my needs and eligibility for products or services;
- (viii) offer and provide me with the other products and services of the Credit Union and of its affiliates and service suppliers.

I understand the Credit Union requires and may use my Social Insurance or Business Number as may be applicable as an aid to identify me with credit bureaus and other financial institutions for credit matching purposes or for income tax reporting purposes. I also understand that the provision of my Social Insurance Number for credit matching purposes is optional and is not a condition of service.

I also understand that I may ask the Credit Union to stop using my Social Insurance Number for credit matching purposes at any time. I understand it is necessary to keep my Information current and I agree to notify the Credit Union of any changes in my Information.

**I understand that the Credit Union needs my consent to collect, use and disclose Information gathered about me except when the law allows the Credit Union to do so without my consent. For that purpose, I authorize, consent to, and accept this as written notice of the Credit Union obtaining, gathering, copying, scanning, updating, disclosing, sharing or exchanging such Information about me at any time for the purposes described including from or with any credit bureau, government agency, credit grantor or other entity in possession of such Information and I specifically direct and authorize such entities to provide Information at the Credit Union's request.**

The Credit Union is also authorized to continually update, obtain and use Information at any time in connection with my loans, including enforcement purposes. The Credit Union may share and exchange Information with any guarantor of the loan or any other lender or credit grantor that is participating in the loan or who may receive an assignment of all or part of the loan. The Credit Union may use this Information for so long as it is needed for the purposes described. I understand that I can ask the Credit Union to stop using the Information to offer other products or services at any time.

For the purpose of this authorization, Credit Union affiliates and service suppliers mean Credit Union affiliates and service suppliers that are engaged in the business of providing services or products to the public in Canada including, but not limited to, deposits, financing arrangements, credit, charge and payment card services, trust and custodial services, securities and brokerage services, insurance services, electronic services, information and technology services, educational and consulting services.

To assist in providing financial services, the Credit Union may use service providers located in the United States. In the event that a service provider is located in the United States, Information may be processed and stored in the United States and United States governments, courts or law enforcement or regulatory agencies may be able to obtain disclosure of the Information through the laws of Canada and the United States.

### Privacy

Credit Union and Privacy legislation prescribe and restrict the use of personal, financial or credit information (Information) without consent. To obtain details about Credit Union policies and procedures for protecting privacy of Information and Customer rights please contact the Credit Union, Attention: Privacy Officer.

**THIS FORM CONTAINS AN AUTHORIZATION TO OBTAIN, SHARE AND EXCHANGE INFORMATION AND, UNLESS I HAVE ASKED THE CREDIT UNION NOT TO DO SO, USE A SOCIAL INSURANCE NUMBER FOR CREDIT MATCHING PURPOSES**

Date: \_\_\_\_\_ Applicant's Signature \_\_\_\_\_  
(Note – A separate authorization is required for each individual applicant)