EDGE

Economic Diversification and Growth Enterprises Application Process

Each applicant must submit a comprehensive business plan. This plan must include the following basic components, as described in the detailed literature that pertains to the EDGE Legislation.

- A detailed description of the type of business to be established or expanded;
- A market plan that includes estimates for growth, an analysis of market risks, and a description of competition in the marketplace;
- A human resources plan that includes an estimate of the number and types of jobs to be created, the training, if any, that will be required, and the extent to which residents of the province can expect to find jobs with the corporation;
- Structure of ownership;
- A financial plan including the proposed financial structure of the corporation and future financing requirements to support new business activity;
- A description of all technical aspects of the proposed operation; and
- Current financial information on the applicant's existing and proposed businesses.

All information provided remains confidential.

Identification of the Applicant

Operating name, if different	Whom enquiries may be directed		
Address	Area Code & Telephone Number		
Mailing Address	Area Code & Facsimile Number		

Declaration of Applicant

- a) The information given in this application is, to the best of my knowledge and ability, complete, true and correct.
- b) I will provide all information required to complete the assessment of this project and I consent to the Department of Innovation, Trade and Rural Development making any enquiries of such persons, firms or corporations as deemed necessary in order to reach a decision on this application.
- c) I will instruct the financial institution identified in the proposal, to provide the Department of Innovation, Trade and Rural Development full information concerning my (the Applicant's) operations and financial position. I further authorize the Department of Innovation, Trade and Rural Development to discuss fully my (the Applicant's) affairs with the lender.

Name and Title of	Authorized (Official	
Name of authorize	ed Official (C	ompany Seal if	Applicable)
Signed at	this	, day of	, 200

Send to:

Government of Newfoundland and Labrador
Department of Innovation, Trade and Rural Development
2nd Floor, West Block, Confederation Building
P. O. Box 8700

St. John's, NL A1B 4J6

Attention: Director, Business Analysis Division

For more information:

Telephone: (709) 729-5066, Facsimile: (709) 729-7609