**BUSINESS PLAN**

|  |
| --- |
| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **BUSINESS DESCRIPTION** |
| **DESCRIPTION OF BUSINESS** |   |
| **WHO ARE YOU TARGET CLIENTS?**  |   |
| **MANAGEMENT** |
| **PERSONAL BUSINESS EXPERIENCE** |   |
| **BUSINESS ORGANIZATION****(Owner %, Legal Structure)** |   |
| **PRODUCT DESCRIPTION** |
| **DESCRIPTION OF PRODUCTS/SERVICES** |   |
| **PRICING + BILLING PLAN** |  |   |
| **MARKET** |
| **EXISTING CLIENTS & CONTRACTS** |   |
| **EXPECTED CLIENTS & CONTRACTS** |   |
| **GOALS (growth, revenue, clients, etc)** |
| **WHERE DO YOU SEE YOUR BUSINESS IN 1 YEAR?** |   |
| **WHERE DO YOU SEE YOUR BUSINESS IN 5 YEARS?** |   |
| **IS/WILL THIS BE YOUR FULL TIME JOB? EMPLOYEES?** |  |

|  |
| --- |
| BUSINESS BALANCE SHEET |

|  |
| --- |
| This section is required for all existing business applicants. Please complete the following information. |
| ASSETS |
| CURRENT ASSETS |
| 1 | Cash | $ |
| 2 | Accounts Receivable | $ |
| 3 | Inventory | $ |
| 4 | Prepaid Expenses | $ |
| 5 | Other | $ |
| 6 | Total Current Assets (Add lines 1 through 5) | $ |
| FIXED ASSETS |
| 7 | Machinery and Equipment | $ |
| 8 | Land | $ |
| 9 | Buildings | $ |
| 10 | Other | $ |
| 11 | Total Fixed Assets (Add lines 7 through 10) | $ |
| 12 | Total Assets (Add line 6 and 11) | $ |
| LIABILITIES AND NET WORTH |
| CURRENT LIABILITIES (Due within 12 months) |
| 13 | Accounts Payable | $ |
| 14 | Taxes Payable | $ |
| 15 | Notes Payable | $ |
| 16 | Other | $ |
| 17 | Total Current Liabilities (Add lines 13 through 16) | $ |
| LONG TERM LIABILITIES (Due after 12 months) |
| 18 | Loans Payable | $ |
| 19 | Other | $ |
| 20 | Total Long Term Liabilities (Add lines 18 through 19) | $ |
| 21 | Total Liabilities (Add line 17 and 20) | $ |
| 22 | Owner’s Equity/Net Worth (Line 12 minus 21) | $ |
| 23 | Total Liabilities & Net Worth (Add line 21 and 22) | $ |
| NOTES |

|  |
| --- |
| BUSINESS START-UP COST PROJECTIONS |

|  |  |
| --- | --- |
| Start-up Expenses | Ongoing Expenses |
| List one-time expenses expected to be paid one time at start up or once within the next 12 months. Examples are deposits, yearly subscriptions, yearly insurance, purchase initial inventory, licenses, marketing, etc. | List expenses expected to be paid monthly. Examples are rent, mortgage, utilities, payroll, monthly insurance, supplies, loan payments, etc. |
| 1 |  | $ | 1 |  | $ |
| 2 |  | $ | 2 |  | $ |
| 3 |  | $ | 3 |  | $ |
| 4 |  | $ | 4 |  | $ |
| 5 |  | $ | 5 |  | $ |
| 6 |  | $ | 6 |  | $ |
| 7 |  | $ | 7 |  | $ |
| 8 |  | $ | 8 |  | $ |
| 9 |  | $ | 9 |  | $ |
| 10 |  | $ | 10 |  | $ |
| 11 |  | $ | 11 |  | $ |
| 12 |  | $ | 12 |  | $ |
| 13 |  | $ | 13 |  | $ |
| 14 |  | $ | 14 |  | $ |
| 15 |  | $ | 15 |  | $ |
| 16 |  | $ | 16 |  | $ |
| 17 |  | $ | 17 |  | $ |
| 18 |  | $ | 18 |  | $ |
|  | Total | $ |  | Total | $ |

|  |
| --- |
| Financial Projections |
| Revenue | Month 1 | Month 2 | Month 3 | Month 4 | Month 5 | Month 6 | Month 7 | Month 8 | Month 9 | Month 10 | Month 11 | Month 12 | Total Year 1 | Total Year 2 | Total Year 3 |
| Sales Revenue |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cost of Goods Sold |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Total Gross Profit(Sales-COGS) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Expenses | Month 1 | Month 2 | Month 3 | Month 4 | Month 5 | Month 6 | Month 7 | Month 8 | Month 9 | Month 10 | Month 11 | Month 12 | Total Year 1 | Total Year 2 | Total Year 3 |
| Rent |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Office Supplies |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Phone and Internet |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Payroll |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Utilities |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Insurance |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Maintenance |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Interest |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Taxes |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Total Expenses |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Net Income (Profit – Expenses) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |