Business Plan Questionnaire

1. **Company Information**

Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City, State, Zip Code:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax #:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Funding Sources**

Type of Financing? (Circle one)   Loan       Investment   
  
Amount Needed:   
  
How Much of Your Own Money Will You Invest? (Many lenders require 20% to 35% of total start-up funding to come from investments)

1. **Use of Funds**

Purchase Land or Building $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purchase Computer Equipment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purchase Office Equipment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purchase of Other Equipment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purchase of Vehicle(s) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Retirement of Current Debt $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purchase a Business $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purchase Inventory $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Leasehold Improvements $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Working Capital: (many lenders recommend cash reserves equal to 3 months' operating expenses)   
Other Start-up Expenses (explain):

1. **Background**

A. What business are you in? (What needs does your business meet in the marketplace?)

(2–3 sentences)

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| --- |
|  |

B. What services and/or products do you provide?

(1 paragraph)

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|  |

1. What are your business objectives over the next two years? Be as specific as possible, and make sure to address the following goals:
   * Number of customers
   * Revenue
   * Profit
   * Market share

|  |
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|  |

D. What compelled you to start this business?

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|  |

1. **Ownership**

Owner/Co-Owner                     % of Ownership   
  
  
  
  
  
  
Provide a resume or 2-3 paragraph work history for each owner who participates materially in the operation of the business.

1. **Staffing**

Provide the requested information about your projected staff. Include yourself and any co-owners who materially participate in the operation of the business and/or receive salaries or wages from the business. If your staff will include more than 10 people, provide information only for key management personnel.

Name                             Position                                          Annual Salary/Wage

1. **Facilities**

Briefly describe your location. Include address, name of shopping center or office complex, square footage, and advantages of the location. Also include descriptions of any special equipment you have.

1. **Notes Payable**

To help us project all of  your future interest and loan principal payments, please provide descriptions of all business notes payable that will remain after you receive the requested funding (don't include the requested loan).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Purpose of Loan | Current  Balance | Original  Balance | Date of Origin | Monthly Payment | Term (Years) | Interest Rate |