



Post-COVID Professional Services Relief

Up to \$5,000 will be granted to the SME applicant for a third-party delivery agent, training consultant or independent service provider for eligible services. Funding will be issued on a continuous intake model to ensure funds are disbursed as quickly as possible. Funding is eligible until March 31st, 2021 or until funds are exhausted.

Projects should reflect one of the following priorities:

1. Business Planning
2. Business Development
3. Professional Consultations
4. Financial Processing (Set-up/Training)

Project Eligibility:

- A SME (Small-Medium Enterprise) is a business of strategic importance to the community. i.e. retail shops, restaurants, corner stores.
 - SMEs are defined as having less than 500 employees and annual sales revenue of less than \$20 million. SMEs produce goods and services for the economy regardless of their business structure (i.e. sole proprietorship, social enterprises, cooperatives).
- The applicant has attempted to access other federal relief supports and was ineligible or rejected (including CEBA, AFI funding).
- The SME must have been established and viable as of March 1st, 2020.

Examples of Eligible Services Acquired After March 15th, 2020:

- Feasibility Studies, Financial Assessments, Financial Training, Business Planning Consultations, Business Development Consultations, Marketing Consultations, Industry Expertise Training, other Professional Consultations

Thank you for completing the attached form and returning it to:

Samantha Smith – NWCF Network Coordinator

Ssmith@lowbic.on.ca

T: 807-464-1116 F: 807-467-4645



Post-COVID Professional Services Relief FORM

Applicant Contact Information	
Legal Name of Applicant:	
Business Name:	Business Number:
Business Sector:	Ownership Type:
Address:	
Business Telephone Number:	Fax Number:
Provide a description of your business:	
Business's Authorized Contact Information	
Legal Name of Authorized Contact:	Title:
Email:	Business's Telephone Number:

Project Description	
Please provide a brief description of the professional services you require:	
How will these services impact your business recovery due to COVID and the initial announcement of the State of Emergency declared in Ontario on March 15, 2020?	
Will there be an increase in jobs? If so, how many?	Will these services assist in the maintaining of jobs? If so, how many?
Anticipated start date:	Anticipated end date:
Type of service that will be provided (i.e. workshop, consultation, software, training):	
This service will lead to your business (check all that apply): <ul style="list-style-type: none"> <input type="checkbox"/> Expanding <input type="checkbox"/> Modernizing <input type="checkbox"/> Maintaining 	
Service Provider Information	
Business Name:	Website:
Telephone number:	Email:
Address:	
Cost of Services:	<i>Please Provide Invoice/Proof of Payment of Services with Application.</i>



Applicant Signing Authority	
<i>By signing below, I am acknowledging the information that is provided is true and accurate.</i>	
Signature of Applicant:	Date:
To Be Completed by CFDC	
Name of Individual Reviewing Application:	
Signature of Individual Reviewing Application:	Date:
CFDC:	Application Number:
Recommendation/Rationale as to why approval was granted:	
To Be Completed by Host CFDC Only (LOWBIC)	
Cheque Number:	
Administration Signature:	Date:
Signature Authority One:	Date:
Signature Authority Two:	Date: