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| Innovation Growth Program (IGP)  Application Form |

| **Section 1: MANDATORY APPLICATION REQUIREMENTS**  **All fields/documents must be accounted for when submitting an application package** |
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| **Eligibility Requirements - check off *before completing* the application** | |
| Confirm your eligibility for the program by reviewing each section below and indicating that you meet each requirement by clicking in the box in the right hand column – | |
| Applicant has reviewed the [IGP application support document](https://www.gov.mb.ca/jec/busdev/financial/igp/pdfs/igp_application_support_document.pdf) |  |
| Applicant corporation is a for-profit taxable Canadian-controlled private corporation |  |
| Applicant corporation has a permanent establishment in Manitoba |  |
| Applicant corporation, and its affiliates on a consolidated basis, have annual revenue of $15 million or less, **or** have fewer than 100 full time equivalent employees |  |
| Applicant corporation has owner investment of $25,000 in cash equity invested in the business. Cash equity is defined as common or preferred share capital and / or retained earnings |  |
| Applicant corporation, and its affiliates on a consolidated basis, pay at least 50% of total salaries and wages to Manitoba residents |  |
| **Application Attachments - check off *before submitting* your completed application** | |
| Confirm that the following documents are attached with this application by clicking in the box in the right hand column: | |
| 1- A completed Application Form in Microsoft Word |  |
| 2- Most recent T2 tax return, or [Start Up Letter](https://www.gov.mb.ca/jec/busdev/financial/sbvctc/pdfs/startup_letter_april_2018.pdf) for new companies |  |
| 3- Current balance sheet and income statement of the applicant (no older than 3 months) |  |
| 4- Year-end Financial Statement including balance sheet and income statement of the applicant (for the last fiscal year) |  |
| 5- Proof of matching project funding from non-government sources (i.e., bank statements or bank letters confirming secured financing, etc.) |  |

Available in alternate formats upon request.

| **Section 2: Company Information/General Business Overview** |
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| **9 Digit Business Number:** | Click or tap here to enter text. |
| **Company’s Legal Name:** | Click or tap here to enter text. |
| **Company’s Operating Name:**  **(If different from Legal Name)** | Click or tap here to enter text. |
| **Mailing Address:** | Click or tap here to enter text. |
| **Physical Address:**  **(if different from mailing address)** | Click or tap here to enter text. |
| **Contact Person (name & title):** | Click or tap here to enter text. |
| **Email Address:** | Click or tap here to enter text. |
| **Phone Number:** | Click or tap here to enter text. |

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| **List of shareholders and their ownership percentage:** | Click or tap here to enter text. |
| **If the Company is a subsidiary, provide the legal name of the parent company:** | Click or tap here to enter text. |
| **List any companies affiliated with the applicant corporation: (Companies that share a common owner or group of owners)** | Click or tap here to enter text. |

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| **Business Sector (required)** | Choose an item. |
| **Sub-Sector (if applicable)** | Choose an item. |
| **# Years in Business** | Click or tap here to enter text. |

Describe the management team, including experience, and capacity to carry out the project.

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| Click or tap here to enter text. |

| **Section 3: Product / Process Description and Market Environment** |
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Briefly describe the product or process for which you are requesting funding: (Maximum 1–2 paragraphs)

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| Click or tap here to enter text. |

What makes your product or process innovative? ([See section 3 of Application Support Document](https://www.gov.mb.ca/jec/busdev/financial/igp/pdfs/igp_application_support_document.pdf))

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| Click or tap here to enter text. |

Describe your target market for your product: Who is your customer? What is the size of your target market in dollars ($)? Include evidence to support your claims.

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| Click or tap here to enter text. |

Describe the benefits of your process innovation: increased efficiency, reduced waste, improve customer service, etc.)

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| Click or tap here to enter text. |

Describe the competitive environment for your product or process. Outline key competitors, your competitive advantage, and what share of the market you plan to capture.

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| Click or tap here to enter text. |

Describe the commercialization plan for your product or process; i.e., how you plan to capture/increase your targeted market share. Please include a timeline for each commercialization or development stage. (Maximum 2–3 paragraphs)

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| Click or tap here to enter text. |

| **Section 4: Funding Request and Project Details** |
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| Amount of IGP Funding Request | $ Click or tap here to enter text. |

Provide a brief description of the specific project and project activities you propose to undertake with IGP funding. (Maximum 2–3 paragraphs)

Project activities **must be completed (incurred and paid) within one year** as defined in the contribution agreement. Project activities must align with eligible costs ([see Section 4 of Application Support Document](https://www.gov.mb.ca/jec/busdev/financial/igp/pdfs/igp_application_support_document.pdf)) for this program

| Click or tap here to enter text. |
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Use the chart below to provide an overview of the overall costs associated with the IGP project you have identified. Please complete all areas that apply to your funding request.

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| **Type of Activity** | **Total Activity Cost** | **Source of Funding** | | | | | **Estimated timeline for this stage**  **(date - date)** |
| **IGP**  **Contribution** | **Applicant Contribution** | **Other Manitoba Government Funding** | **Other Public Funding** | **Private Contribution** |
| *Development of new innovative products or processes – excluding internal labour* | | | | | | | |
| Prototype building |  |  |  |  |  |  |  |
| Tooling and moulds for prototype or production |  |  |  |  |  |  |  |
| Testing & Operational Trial Runs |  |  |  |  |  |  |  |
| Obtaining certification |  |  |  |  |  |  |  |
| Registering intellectual property |  |  |  |  |  |  |  |
| Other -  (Please describe) |  |  |  |  |  |  |  |
| *Commercializing market ready innovative products or processes – excluding internal labour* | | | | | | | |
| Adaption costs for new markets  (i.e., packaging, translation, new patents, testing or certification) |  |  |  |  |  |  |  |
| Market development / expansion (including tradeshow costs) |  |  |  |  |  |  |  |
| Other -  (Please describe) |  |  |  |  |  |  |  |
| *Internal Labour Costs – Project Specific* | | | | | | | |
| New Hires (MB) – IGP eligible |  |  |  |  |  |  |  |
| Internal Labour (MB) – IGP ineligible |  |  |  |  |  |  |  |
| **Total $** |  |  |  |  |  |  |  |

**Project Financing and Funding Sources**

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| Public or Private  Funds | Nature of Funding  Please include: Name of Program / Partner & Type of Funding – i.e., investment, grant, loan, forgivable loan, subsidy, etc. | Amount | Confirmed or  Pending |
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| **Section 5: Proposed Economic Benefits of Project** |
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For the corporation, please indicate:

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| Anticipated  Economic Impacts | Estimated total annual sales ($) | Sales exports outside of Manitoba ($) | Leveraged Funding - Other government | Leveraged Funding - Private | Purchases from Manitoba suppliers |
| **Current year** | $ | $ | $ | $ | $ |
| **1 year from now** | $ | $ | $ | $ | $ |
| **2 years from now** | $ | $ | $ | $ | $ |
| **In 5 years** | $ | $ | $ | $ | $ |

For the corporation, please indicate:

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| --- | --- | --- | --- | --- | --- |
| Manitoba Employment Table | Full-time  (#) | Part-time  (#) | Contract  (#) | Non-Manitoba Based | **Total Internal Manitoba Labour Expenses (Annual Salaries and Benefits from T4s)** |
| **At Present (Pre-project)** |  |  |  |  | $ |
| **1 year from now** |  |  |  |  | $ |
| **2 years from now** |  |  |  |  | $ |
| **In 5 years** |  |  |  |  | $ |

| **Section 6: Disclosure and Authorization** |
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***Notice about Personal Information:***

*Manitoba Economic Development, Investment and Trade (EDIT) is authorized to collect personal information on this form by section 36(1)(b) of The Freedom of Information and Protection of Privacy Act (FIPPA). The information can only be used to:*

* *process this application for Innovation Growth Program (IGP) financial support;*
* *determine and verify eligibility for financial support;*
* *for research, planning and reporting purposes; and*
* *to administer and evaluate IGP with other provincial departments.*

*Your personal information is protected by FIPPA. We cannot use or disclose it for any other purpose, unless you consent or we are authorized or required to do so by FIPPA. If you have any questions about your personal information, please contact 204-945-1252.*

***Declaration and Consent***

*I declare that the information given on this application and any documents attached is correct and complete and fully discloses the project activities. I understand that:*

* *I must immediately notify Manitoba Economic Development, Investment and Trade in writing of any changes to the information in this application including updating funding sources, as appropriate;*
* *information provided in this application is subject to audit and verification;*
* *information that is false or misleading in this application may result in disqualification; and*
* *fraud and forgery are offences under the Criminal Code of Canada.*

***Consent to Indirect Collection and Disclosure of Personal Information***

*I understand that Manitoba Economic Development, Investment and Trade (EDIT) may need to obtain additional information about my organization, including financial circumstances, income, assets, resources and credit history for the following purposes:*

* *to determine and verify eligibility for financial support;*
* *for research, planning and reporting purposes; and*
* *to administer and evaluate Innovation Growth Program (IGP) initiatives.*

*Specifically regarding the following Acts, I provide my consent to the Provincial Government and Municipal offices that administer these Acts, to disclose and provide information pertaining to the status of this applicant corporation to EDIT for IGP program purposes as described above:*

* *Employment Standards Code (Manitoba)*
* *Health and Post Secondary Education Tax Levy Act (Manitoba)*
* *Labour Relations Act (Manitoba)*
* *Retail Sales Tax Act (Manitoba)*
* *Tax Administration and Miscellaneous Taxes Act (Manitoba)*

*I also consent to EDIT providing information from this application to other government departments, agencies, and to contracted strategic and regional partners, as may be necessary for IGP program administration, evaluation and verification purposes.*

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| *(Required)*VERIFICATION: *Please sign and date.*  By submitting this application to Manitoba, the company verifies that all information provided in this application is correct. | **Please print name** |  |
| Click or tap here to enter text. |  |
| **Date** |  |
| Click or tap here to enter text. |  |

Please submit an electronic copy of your completed IGP Application with the necessary supporting documentation to:

**Innovation Growth Program**

**Manitoba Economic Development, Investment and Trade**

**Email:** [**ecdevprograms@gov.mb.ca**](mailto:ecdevprograms@gov.mb.ca)

**Phone: 204-945-2475**