



# Atuqtuarvik Corporation

## Loan Application Form

- Please review the attachment titled "Information for Applicants" before filling out the application form.
- Should any of the following requests for information give rise to questions, please do not hesitate to call us.
- You may communicate with us in either Inuktitut, Inuinnaqtun or English

### Applicant Information:

Name of business applying as listed in the Nunavut Tunngavik Inc. Inuit Firm Registry:

\_\_\_\_\_

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

Name of contact person: \_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Legal form of business applying: \_\_\_\_\_

Example: sole proprietorship; partnership; incorporated

**Note:** If Incorporated Company *please attach a list of officer & directors & shareholders and a copy of the incorporation documentation*

Category of Applicant (Check appropriate box):

- Inuit firm certified by Nunavut Tunngavik Inc. for inclusion on the Inuit Firm Registry under Article 24 of the Nunavut Land Claims Agreement and having their principal place of business in Nunavut
- Birthright Corporation, or 100% owned subsidiary of a Birthright Corporation located in Nunavut

Purpose of Loan: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total Amount of Project	\$ _____	Minus
Amount of applicant's contribution	\$ _____	Minus Other
Financing (Grants/Government or Bank Loans)	\$ _____	
<b>= Amount of Atuqtuarvik Corporation Loan Request</b>	<b>\$ _____</b>	



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### Documentation

In order to begin the process of evaluating your application for funding, we require the following documentation:

- Information about the applicant, including the nature of current business, financial history and projections as appropriate.
- Proposed ownership structure of project.
- A project overview and the role that Atuqtuarvik Corporation is being asked to play.
- Business plan (Please see attachment for further details)

I (we) certify that all information in this statement and enclosures is true and complete, and understand that it will be used by the Atuqtuarvik Corporation to determine my (our) creditworthiness. I (we) agree that the Atuqtuarvik Corporation may also give to, receive from, and share and exchange with others, including credit bureaus, and persons with whom I (we) have or may have financial dealings, credit and other information about me (us).

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Signature of Authorized Signing Officer	PRINT NAME	Date
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Signature of Authorized Signing Officer	PRINT NAME	Date
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**You can send mail to:** P.O. Box 900, Rankin Inlet, NU X0C 0G0

**For information call:** Kathleen Sigurdson, Account Manager

Telephone: (867) 645-5900; in Nunavut 1-888-645-5901; Facsimile: 645-5910

Website: [www.atuqtuarvik.com](http://www.atuqtuarvik.com)

**E-Mail Address:**

Kathleen Sigurdson      [ksigurdson@atuqtuarvik.com](mailto:ksigurdson@atuqtuarvik.com)