U.S. SMALL BUSINESS ADMINISTRATION 8(a) BUSINESS PLAN

OMB Approval No.: 3245-0331 Expiration Date: 3/31/2014

NAME OF COMPANY:					
ADDRESS OF COMPANY:					
CONTACT PERSON:		TELEPHONE NO).:		
\$	SBA STATEMENT ON REPRES	ENTATIVES AND I	EES		
You are not required to use a reprepurpose, the following information	esentative to complete this busing must be provided:	ess plan. If you cho	ose to hire a	representat	ive for this
Names of Representatives and Addresses	Description of Services	Houri Rate		ount d	Amount Due
					_
					-
Signature of Principal				Date	
Signature of Representative				Date	

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SECTION I - EXECUTIVE SUMMARY

1. Briefly describe the fundamental elements of your business. Describe what business you are in, why you are in it, and what you hope to accomplish. For example, describe your business in terms of where it has come from, where it is now, where you want it to go, and how you plan to get it there. This is a complete summary of your business plan and should be referred to on occasion by you and your assigned Business Opportunity Specialist to get a quick overview of your plan. You should prepare the summary after you have completed all other major components, which follow.

SECTION II - BUSINESS HISTORY, BACKGROUND, AND OBJECTIVES

2.	Briefly describe when, how, and why you formed the company and its development so far.
3.	List your short term (next 12 months) and long term objectives.

4.	Describe your company's major successes or achievements to date including difficulties and/or obstacles that your company has overcome.

5.	Describe how the company was initially capitalized, and how it has been funded since its founding.
6	Describe any important changes in the structure, ownership, management, or key personnel which have
6.	Describe any important changes in the structure, ownership, management, or key personnel which have taken place in the past year.
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6.	

SECTION III - BUSINESS ENVIRONMENT

7.	Describe how environmental factors such as the local or national economy, changes in population, interest rates, changes in levels of employment, climate for small disadvantaged businesses in your market, etc. may affect your business.

SECTION IV - PRODUCTS AND/OR SERVICES

8.	List and describe your present products/services. (This list is not necessarily the same products/services for which you are requesting SBA approval of NAIC codes for 8(a) contract support in item #50.)
9.	Describe any planned changes or additions to your present line of products/services within the next year.

SECTION V - PRESENT MARKET

10. Describe your present market.	Give geographic location of your customers and types of customers you serve.		
11. What is the growth potential in your market?			

 Identify major customers and include a brief description and explanation of any special relationship between your company and its customers.
13. Describe your current marketing approach. How do you sell your products/services? (Attach company brochure used as a selling tool, if any.)

15. Describe your credit and collection policy.
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16. If your business is seasonal, explain how the company adjusts to seasonal factors.

SECTION VI - COMPETITION

17. List those firms you have identified as primary competitors in your market(s). Identify their strengths and weaknesses.
18. What advantages and disadvantages does your company have as compared with its primary competitors?

SECTION VII - MARKETING PLAN

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19.	Describe the customers and geographic territory to be targeted for marketing efforts to generate non-8(a) revenue.
20.	Describe the federal agencies and geographic territory to be targeted for marketing efforts to generate 8(a) revenue.

business. Address 8(a) market segments and non-8(a) market segments separately.	

SECTION VIII - MANAGEMENT AND ORGANIZATION

22. Describe your management team and list its strengths and weaknesses.
23. Describe your plan to further develop your management team.

24. Describe your management succession plan. absence of any owner or key employee?	Who will take over in the event of the incapacity or continued
25. Describe the need for, and how you will obtain projected sales.	n, additional management personnel based on present and

SECTION IX - BUSINESS RESOURCES

26. List the major operating equipment that your company owns or leases:

Quantity	Description	۸۵٥	Condition	(Chec	k One)	If Owned
Quantity	<u>Description</u>	<u>Age</u>	Condition	Owned	Leased	Cost
				- [
		_				
		_		_		
		_		_		
	•	_		_		
			_	-		
	-			-		
	-		-			
		_	-			
				_		
		_				
	-		-	-		
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27. List major suppliers, location, and payment terms.
28. Identify other outside resources used/or needed to fulfill customer requirements.
Ze. Identify ether edicate recedines decarer medical to famili edicinior requiremente.

29.	Describe your quality control procedures. put them in place.	If you do not have quality control procedures, outline your plans to
30.	Describe the availability of skilled labor no	ecessary to meet your company needs.

31.	administra	ative emp	oloyees	and the es	ssary training stimated cost can explain.)	. (You may l	required to be eligible to	upgrade the receive fir	e skills of la nancial assis	bor and stance for	
32.	Number of	f Employ	ees:	Full-Time		; Part-Tim	e				

SECTION X - FINANCIAL PLAN/DATA

33.	Describe the company's sales and profit trends.	
34.	Outline your strategy and timing for obtaining additional capital for expansion and/or to meet current needs.	

35. Explain the assumptions used in the development of your two year projected operating statement and cash flow projection in items 45 and 46.
36. If you have a bank line of credit, provide name of bank, about of line, amount owed, amount available, and how secured.
and now secured.
and now secured.
and now secured.
and now secured.
and now secured.
and now secured.
and now secured.
and now secured.

37.	Explain any debt and its purpose that the company and/or the owner has guaranteed on behalf of others, and include a copy of the documents creating the guarantee.

38	Describe your method of financial accounting (cash or accrual); how quarterly and annual financial
00.	statements are prepared (in-house or outside independent accountant). Note if accounting system is manual or computerized.
39.	Explain all abnormal, nonrecurring, and unusual items on the most recent fiscal year-end financial
	statement.

40.	Provide details on all outstanding company loans to officers, directors, stockholders, and employees (name, purpose, original loan amount, current balance, terms and conditions, collateral, interest rate, and date of loan(s)).
41.	Describe any outstanding contingent liabilities, warranties, litigation, claims, etc.
41.	Describe any outstanding contingent liabilities, warranties, litigation, claims, etc.

42. Describe any delinquent company state or federal payroll and income taxes (amount due, period of delinquency, and payment agreements).		

gle job or aggregate) rety, indicate if surety	and source. Indicate if sou has ever been accepted by	rce is corporate or individua y a federal agency on a gove	I surety. If ernment contract.
Compensation of Offic	cers & Directors.		
Compensation of Offic	cers & Directors.	<u>% Ownership</u>	Annual Salary
		<u>% Ownership</u>	Annual Salary
		<u>% Ownership</u>	Annual Salary
		% Ownership	Annual Salary
		% Ownership	Annual Salary
		<u>% Ownership</u>	Annual Salary
		% Ownership	Annual Salary
		% Ownership	Annual Salary
		% Ownership	Annual Salary
		% Ownership	Annual Salary
	gle job or aggregate) rety, indicate if surety	gle job or aggregate) and source. Indicate if sourcety, indicate if surety has ever been accepted by	n or other type of company requiring bonding, describe your company's curre gle job or aggregate) and source. Indicate if source is corporate or individual rety, indicate if surety has ever been accepted by a federal agency on a gove u are required to have third party indemnification on corporate bonds or an S

45. Provide below a projected operating statement for the next two company fiscal years.

Projected Operating Statement

Net Sales		
8(a)		
non-8(a) Gov't		
Commercial		
TOTAL SALES		
Cost of Goods Sold		
Material Purchases		
Direct Labor		
Subcontractors		
Other Direct Costs		
GROSS PROFIT		
Variable Expenses		
Salaries-Officers		
Gross Wages		
Welfare & Pension		
Repairs and Maintenance		
Auto and Truck	•	
Bad Debts		
Administrative		
Advertising		
Operating, Supplies, & Other		
TOTAL VARIABLE		
EXPENSES		
Fixed Expenses		
Rent		
Utilities		
Insurance		
Taxes & Licenses		
Interest		
Depreciation		
TOTAL FIXED EXPENSES NET PROFIT (before income taxes)		

(Name of Business)

46.Estimate below cash flow projections for a twelve-month period for the applicant's next full fiscal year. Indicate the year and the beginning month.

Cash Flow Projection

					(Na	me of Bu	ısiness)				
					١	⁄ear					
						Month	<u>s</u>				
Receipts Cash on hand (beginning) Receipts-Sales Other Receipts Total	<u>1</u>	_2	_3 	_4	5	6	_ 7		9	 	 TOTAL
Disbursement Purchases Gross Wages Payroll Exp. (taxes, ect.) Outside Svcs.								=			
Accounting & Legal Rent Utilities & Telephone											
Insurance Taxes (real est.) (etc.)											
Interest Repairs & Maint. Auto, Trucks										 	
& Travel Equipment Purchases Loan										 	
Repayments Other Cash Payments Specify										 	
Total Cash Paid Cash Balance (end of month)	Out									 	

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(Name of Business)	
Effective Date	

Job#	Project <u>Name</u>	Total Contract Amt.	% Completed	Amount Earned	Amount Billed	(Over/Under) Billed	Payments Received	Amount <u>Due</u>	Est. Compl. Date

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48. Schedule of Notes and Loans Payable

To Whom Payable	Original Amount	Balance_	Interest Rate	Maturity Date	Monthly <u>Payment</u>	Security	Current/ Past Due
	Date of	this Schedule_			_		

SECTION XI - CONTRACT SUPPORT TARGETS

49. Forcast the aggregate dollar value of contracts to be sought under the 8(a) program and non-8(a)	
competitive basis for the next program year and the succeeding program year. The forcast should be	
realistic and based on your management, technical, and financial capability. Keep in mind that your	
company cannot rely totally on 8(a) contract support .	

	Program Year	Program Year
8(a) Support		
Non 8(a) Support		
Total Support		

50. Identify the type of 8(a) contract opportunities being sought by description and corresponding North American Industry Classification System (NAICS) Code. This will constitute your request for approval of NAICS codes in which you are seeking 8(a) contract support. You should request approval of only those NAICS codes for which you have current capability and which are a logical progression of your primary industry classification. As you develop new capability, you may request approval of additional NAICS codes. Your BDS may question or require documentation of capability in certain NAICS codes outside of your primary industry classification.

Description of Products/Services	Primary NAICS Code
Description of Products/Services	Secondary NAIC Codes
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51.	Describe any assistance your company may need from SBA during the next 12 months, other than 8(a) contract support, to help achieve its business development objectives, i.e., business loan, surety bond, counseling in specific areas, training in specific areas, etc.
52.	Describe any other information which you feel is pertinent to understanding your company's past, present, and projected operations.

1.	Signature of preparer if other than 8(a) Fi	rm
	Print or type name of preparer	
2.	If 8(a) Firm is Sole Proprietor, Sign Below	v
	By:	Date
3.	If 8(a) Firm is partnership, all Partners Si	gn Below
	By:	Date
4.	If 8(a) Firm is Corporation, Affix Seal	
	Corporate Seal	
	By: President's Signature	
	response. You are not required to redisplays a currently valid OMB approbe sent to U.S. Small Business Adm Washington D.C. 20416 and Desk COffice of Management and Budget, I Washington, D.C. 20503. OMB Appropriate FORMS TO OMB. For SBA's use in determining burder	for completing this form is 10 hours per espond any collection of information unless it eval number. Comments on the burden should inistration, Chief, AIB, 409 3RD St., S.W., officer for the Small Business Administration, New Executive Office Building, Room 10202, roval (3245-0331) PLEASE DO NOT SEND on, please state amount of time necessary to
	complete this business plan. Hour	minutes