

BUSINESS PLAN

Directions: Complete the information in the following sections. Just do the best you can--you are not expected to get everything perfect. Save the papers you do your figures on because frequently you have to refer back to them.

1. Ownership/management:

- Who will be the owner(s) of the business? _____
- What related skills and/or experience does he/she have? _____
- Who will be the manager of the business? _____
- What related skills and/or experience does he/she have? _____

2. Description of the business:

- What will be the name of the business? _____
- Do you have a logo? _____ If so, attach a copy to this paper.
- What products will you manufacture? _____
and/or
- What services will you provide? _____
- When do you plan to start the business? _____
- Will the business be seasonal? _____

3. Business facility:

- What will be the business address? _____
- Is this address zoned to accommodate this type of business? _____
- How much space can be devoted to the business? _____
- Is that adequate? _____
- What changes need to be made to accommodate the business? _____
- Do these changes need to be made before you can start the business?

- What are your plans for making these changes? _____

4. Market:

- What group of people is your target market? _____
- What geographical area does your market include? _____
- Approximately how many persons are in that market? _____
- What do you think will be your share of the market? _____

- How will you market your product/service? _____
- Do you plan to sell your product/service to a retailer? _____
Or do you plan to be the retailer? _____
- Have you done a market survey? _____
- If so, summarize the results. _____

- How much of your budget do you plan to spend on marketing? _____

5. Competition:

- Who are your competitors? _____
- What advantage(s) do you have over them? _____
- What advantage(s) do they have over you? _____

6. Product and/or service costing/pricing:

- What will be the raw cost of the product? (materials only) _____
- What will be the labor cost on the product? _____
- How much overhead costs do you need to add? _____
(Overhead includes such things as rent, utilities, marketing or advertising expenses, insurance, office supplies and/or equipment, loan payments, etc.)
- How much markup will you have? _____
- What will be the retail price of the product and/or service? _____
- What will be the wholesale price of the product and/or service? _____
- How much profit will you have on each item and/or service? _____

7. Personnel:

- Do you anticipate having to hire any employees during the first year? _____
-If so, how many? _____
- When do you expect to add employees? _____

8. Equipment:

- What equipment do you need to start the business? _____
- How much of that equipment do you have now? _____
- How much will you have to purchase? _____
- How much will that cost? _____

9. Supplies:

- What supplies do you need to start the business? _____
- How many of those supplies do you have now? _____
- How many will you have to purchase? _____
- How much will they cost? _____

10. Financial (capital) needs:

- How much money do you need to start? _____

Include: equipment needs, initial supply costs, business license, facility changes, advertising/marketing, and capital to operate for three months.

- Will you need a loan to start? _____
- Considering your markup per item or service and the amount of your business loan, how many items/services would you have to sell to break even? _____
- How much would your gross sales need to be per month to meet your needs and expenses? _____

BUSINESS PLAN - SUPPLEMENT A

Directions: Complete the information regarding the equipment and supplies needed to begin your business below.

LARGE EQUIPMENT NEEDED:

NAME OF EQUIPMENT	I HAVE IT	I MUST BUY IT	COST	COMMENT
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>

SMALL EQUIPMENT NEEDED:

NAME OF EQUIPMENT	I HAVE IT	I MUST BUY IT	COST	COMMENT
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>

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PRODUCT SUPPLY NEEDS:

NAME OF EQUIPMENT	I HAVE IT	I MUST BUY IT	COST	COMMENT
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		

OFFICE EQUIPMENT/SUPPLY NEEDS:

NAME OF EQUIPMENT	I HAVE IT	I MUST BUY IT	COST	COMMENT
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		

BUSINESS PLAN - SUPPLEMENT B - MANUFACTURING

PRODUCT COST AND PRICING:

Percent of Amount Wholesale Price

Controllable Costs:

Materials	_____	_____
Labor	_____	_____
Advertising/Marketing	_____	_____
 Total Direct Costs	 \$ _____	 _____ %

Fixed Costs:

Design and merchandising:	_____	_____
(Designer salaries, sample fabrics, cost of samples)		
General administrative overhead:	_____	_____
(Salaries, rent, utilities, insurance)		
Sales commission	_____	_____
Trade discount	_____	_____
Markdown allowance, promotion, or other service to retailers	_____	_____
Shortages	_____	_____
Total Indirect Costs	\$ _____	_____ %
 Total Costs	 \$ _____	 _____ %
 Taxes	 _____	 _____
Profit	_____	_____
 Wholesale Cost of Product	 _____	 _____ %

BUSINESS PLAN - SUPPLEMENT B - RETAILER

PRODUCT COST AND PRICING:

	Approximate Cost Per Item	Approximate % of Price
Wholesale price to retailer	_____	_____
Allowance for markdowns (averaged among all products in stock)	_____	_____
Allowance for shortages and theft (averaged among all products in stock)	_____	_____
Salaries and expenses (averaged per garment):		
Sales persons	_____	_____
Merchandising, buying	_____	_____
Clerical and stock room	_____	_____
Advertising, display, promotion	_____	_____
Administrative	_____	_____
Employee fringe benefits	_____	_____
Overhead (averaged per item):	_____	_____
Total	\$ _____	_____ %
Taxes	_____	_____
Profits	_____	_____
Selling price will be:	\$ _____	_____ %
Markup is:	\$ _____	_____ %

BUSINESS PLAN - SUPPLEMENT B - SERVICES

SERVICE COST AND PRICING:

	Approximate Cost Per Hour	Approximate % of Price
Basic rate per hour	_____	_____
Allowance for lost time	_____	_____
Salaries and expenses (averaged per hour):		
Office personnel	_____	_____
Maintenance personnel	_____	_____
Advertising, display, promotion	_____	_____
Administrative	_____	_____
Employee fringe benefits	_____	_____
Overhead (averaged per hour):	_____	_____
Total	\$ _____	_____ %
Taxes	_____	_____
Profits	_____	_____
Hourly price will be:	\$ _____	_____ %
Markup is:	\$ _____	_____ %