

BUSINESS PLAN TEMPLATE

Provided By



OWNERS:

Business Name:

Address:

City, State, Zip Code:

Telephone:

Email:

Company Website:

Business Overview

WHAT: What is the objective of your business? What products/services will your business offer?

HOW: Describe your business operations. What makes your business unique? (Ex: size of operation, location of operation, expansion plans, etc.)

WHO: Who is your target audience? Who will benefit from your products or services?

WHY: Describe the desire and drive behind why you want to pursue this business. What is the mission statement of your business?

IF APPLYING FOR A LOAN: Clearly state how much money you are applying for, how you plan to use it, and how it will make your business more profitable, thereby ensuring repayment.

Business Management and Organization

BUSINESS HISTORY: How long have you been in operation? Were there any previous owners?

ORGANIZATION: How is the business organized? (Corporation, partnership, sole proprietorship, etc.) Who is involved? Please list their roles and responsibilities and/or titles.

STRENGTHS & WEAKNESSES: Describe the strengths and weaknesses of your business.

IMPLEMENTATION TIMELINE: What is your plan of action? What specific tasks need to be completed in order to reach business goals?

GOALS: Please list your operation's short and long term goals. (short-term are 1-3 years, long-term are 3-10 years)

RISK MANAGEMENT: What risk management practices do you have in place? (Insurance, contingency plan, product or market diversification, etc.)

Marketing

INDUSTRY OUTLOOK: What is your target market? What are the current industry trends?

MARKET SHARE: How will you remain competitive? Who are your biggest competitors? Are there any anticipated obstacles?

INCOME: How is your product sold and priced? What is your projected/estimated income? How are you going to gain commitments/contracts to sell your product?

MARKETING: What promotional marketing/communication tools will your business use?

Financials

These are basic templates. Feel free to use more detailed documents if desired.

Balance Sheet

Assets	
Current Assets: (Others include: Prepaid Expenses & Investment in Growing Crops; Market Livestock; Other Liquid Assets)	
Cash	\$
Accounts Receivable	\$
Feed, Seed & Supplies	\$
Crops for Resale	\$
Other	\$
Total Current Assets	\$
Noncurrent Assets: (Others include: Retirement Accounts; Other Term Assets)	
Real Estate	\$
Equipment	\$
Vehicles	\$
Breeding Livestock	\$
Cooperative Investments (Farm Credit Stock)	\$
Other	\$
Total Noncurrent Assets	\$
Total Assets (Current Assets + Noncurrent Assets)	\$

Liabilities	
Current Liabilities: (Others include: Loans with Terms less than 1 year; Current portion of Term Liability Principal due within next 12 months)	
Accounts Payable	\$
Accrued Expenses	\$
Operating Loans	\$
Other	\$
Total Current Liabilities	\$
Noncurrent Liabilities: (Balances should be less than the Principal due in the next 12 months that will be shown as Current Liability)	
Loans (terms greater than 1 year)	\$
Capital Leases	\$
Total Noncurrent Liabilities	\$
Total Liabilities: (Current Liabilities + Noncurrent Liabilities)	\$
Owner's Equity or Net Worth: (Total Assets - Total Liabilities)	\$
Total Liabilities and Owner's Equity (must equal Total Assets)	\$

Income & Expenses

Farm Revenue	
Crops	\$
Livestock	\$
Cull Breeding	\$
Government Payments	\$
Custom Work	\$
Other Farm Income	\$
Total Revenue	\$

Farm Expenses	
Car and Truck	\$
Chemicals	\$
Conservation	\$
Custom Hire	\$
Depreciation	\$
Feed	\$
Fertilizer	\$
Freight and Trucking	\$
Gas, fuel, oil	\$
Insurance	\$
Interest	\$
Labor	\$
Rent	\$
Repairs, maintenance	\$
Seed	\$
Supplies	\$
Taxes	\$
Utilities	\$
Vet, breeding, medicine	\$
Other Farm Expenses	\$
Total Expenses	\$
Net Farm Income (Total Revenue - Total Expenses)	\$

Certification:

By signature hereto, the undersigned certifies the information set forth above, and on the attached schedules and Income Statement, is true and correct, containing no material misrepresentations or omissions.

Signature

Date

Business Advisors

Optional: This can be included as supplemental information.

Type:	Name:	Organization/Business Name:	Contact Information (Phone/Email):	Notes:
Attorney				
Accountant				
Lender/Banker				
Insurance Agent				
Consultants				
Other				

