APPLICATION FORM



About you

Name:	Business Name: (if applicable)			
Address:				
Telephone:	Email Address:			
About the business				
Business Sector:	Retail	Construction	Manufacturing	Business Services
	Other (please state)			
Is the business trading?	Yes	Business Type	Sole Trader	Limited Company
	No		Partnership	Not sure/undecided
Your applicatiou				
About the business: Giv	ve an outline of what indust	try you are entering, what sort of clied	nts you will target and why yo	ou think it will work
Business plan: What are y Share you	your dreams, where do you r ambitions and persuade u	see this business going in the comir is to support you	ng months and years	
Barriers to entry: Somet If you o	times we all hesitatebut c can, tell us what specifically	do you know why? is holding you back rather than givir	ng a wide sweeping answer	
Additional comments:	Please include here any or	ther information that you want us to	have	

GDPR: I consent to CBSL to hold my data securely. We may contact you by post, SMS, phone and other electronic means. We'll always treat your personal details with the utmost care. For more details on our privacy policy please visit our website.