



Delaware County  
Economic  
Development

# Business Plan Workbook

*Develop Your Business Plan Format*

## INTRODUCTION

Describe your business idea, and business goal(s). What is your idea, why would it make for a successful business, who else is doing it, why it is so unique, how would you do it, what do you need to make it happen, and how will you gauge your success.


What type of industry are you: e.g. agriculture, retail, service, etc.


Describe the location or proposed location of your business, and why it's suited for your business:


Describe your leading advantage: (best quality of workmanship, lower price...)


Who will own and/or manage the business and what special skills or experience do they have in this area of business.


## COMPLIANCE

List those things you need to do to make sure that you comply with permits and regulations. Include what type of tax forms you need to complete and how are you going to get everything in order for your new business. Talk about the kind of insurance you would need and why.

<b>PERMITS</b>
<b>TAXES</b>
<b>LIABILITY</b>



## COMPETITION

DIRECT COMPETITORS – LIST ALL (Good things about their services or products)	Your Business ( How are you going to improve the product or service)
Name:	
Address:	
Years in Service:	
Name:	
Address:	
Years in Service:	
Name:	
Address:	
Years in Service:	

INDIRECT COMPETITORS (SUBSTITUTES FOR YOUR PRODUCTS)	Your Business ( How are you going to improve the product or service)
Name:	
Address:	
Name:	
Address:	
Name:	
Address:	

## COMPETITIVE ADVANTAGE


## MARKET PROFILE

Describe in detail the market/demand for your products or service(s) (size of market, etc.):


Describe the type of person that would buy your product or use your service (age, gender, income level, family status, career, leisure activities, education, etc.):


What attracts this person to your product or service, in general:


How will you market your product or service to prospective customers, specifically:


Where are you going to market your products or services (e.g., Town, County, Region, State/Nation-wide)


## PRICING STRATEGY & SALES POTENTIAL

Explain how you are going to price your products (LIST YOUR COST, TIME INVOLVED, OVERHEAD AND EXPLANATION OF HOW PRICING MEASURES AGAINST COMPETITION).

e.g. Sewing Machine	\$105.00

### Sales Potential Chart

MONDAY	How Many	\$\$\$\$\$\$
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
TOTAL WEEK POTENTIAL FOR REVENUE		

# Marketing Strategy Pro-forma

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COMPANY NAME

## About Our Organization

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## Long Term Goal:

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## Short Term Goal:

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## Our Market Position

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## Our Targeted Market & Strategies

Product or Service	Customers To Be Targeted	Strategy

## MARKETING IDEAS

Idea	Tools to be developed	Budget

**\*PRINT A MAP AND CIRCLE THE AREA**

**\* INCLUDE A COPY OF YOUR FLIER OR BROCHURE IN THIS SECTION**

# MANAGEMENT

Explain in Detail HOW THE BUSINESS WILL OPERATE, WHO WILL DO THE BILLING, TYPING, WHO WILL DO THE TAXES, ETC.


Who is part of your business team?

Name and phone number

Banker	
Business Counselor	
Accountant	
Insurance Agent	
Attorney	
SCORE counselor	
Trade Association	

Who will be working with you in your business?

Name	Tasks to be performed

## OWNER'S PROFILE

Explain how your past working experience would benefit your new business. For example, a schoolteacher gains a lot of experience planning the lessons. This helps a person be more strategic in their business.


Explain how your education would help the new business:


Explain how your personality would help the new business:


**INCLUDE YOUR RESUME AT THE END OF THIS SECTION**

## FINANCIAL PROJECTIONS

List the monthly expenses of your business:

	JAN	FEB	MAR
Utilities			
Telephone			
Materials			
Postage			
Office Supplies			
Equipment			
Insurance			
Professional Fees			
Owners Salary			
Marketing			
Transportation			
Rent			
Other:			

	APR	MAY	JUN
Utilities			
Telephone			
Materials			
Postage			
Office Supplies			
Equipment			
Insurance			
Professional Fees			
Owners Salary			
Marketing			
Transportation			
Rent			
Other:			

	<b>JUL</b>	<b>AUG</b>	<b>SEP</b>
Utilities			
Telephone			
Materials			
Postage			
Office Supplies			
Equipment			
Insurance			
Professional Fees			
Owners Salary			
Marketing			
Transportation			
Rent			
Other:			

	<b>OCT</b>	<b>NOV</b>	<b>DEC</b>
Utilities			
Telephone			
Materials			
Postage			
Office Supplies			
Equipment			
Insurance			
Professional Fees			
Owners Salary			
Marketing			
Transportation			
Rent			
Other:			









**CASH FLOW ANALYSIS FOR 1<sup>ST</sup> TWELVE MONTHS**

YEAR

MONTHS																				
Starting Balance																				
Cash																				
Loans																				
Sales																				
<b>Total Cash In</b>																				
<b>Expenses</b>																				
Cost of Goods Sold																				
Loan Expense																				
Utilities																				
Rent Expense																				
Auto. Expense																				
Advertising																				
Promotion																				
Selling Expense																				
Distribution																				
Other																				
Other																				
Other																				
<b>Total Cash In</b>																				
<b>Total Cash Out</b>																				
<b>Cash Flow</b>																				

\*\*NOTE: Cash Flow becomes Starting Cash Balance of next month.

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Distribution																				
Other																				
Other																				
Other																				
<b>Total Cash In</b>																				
<b>Total Cash Out</b>																				
<b>Cash Flow</b>																				

**\*\*NOTE:** Cash Flow becomes Starting Cash Balance of next month.

Please complete a Balance Sheet for your business as of this moment, include those assets now available to your business and those commitments for liabilities.

## BALANCE SHEET FORM

ASSETS:

LIABILITIES:

**Current Assets:**

Cash-on-hand  
Accounts receivable  
Merchandise Inventory  
Supplies  
Total Current Assets


**Current Liabilities:**

Accounts Payable  
Credit Card Debt  
Installment Loans (i.e. auto)  
Other \_\_\_\_\_  
Total Current Liabilities


**Fixed Assets:**

Fixtures & Capital Imp.  
Building/Land  
Equipment  
Automobiles  
Other \_\_\_\_\_  
Total Fixed Assets


Notes Payable to Others  
Bank Mortgages  
Line of Credit  
Other \_\_\_\_\_  
Other \_\_\_\_\_  
Total Long-Term Liabilities


**TOTAL ASSETS**

**TOTAL LIABILITIES**

**NET WORTH (TOTAL ASSETS MINUS TOTAL LIABILITIES) \$ \_\_\_\_\_**