



Delaware County  
Economic  
Development

# Business Plan Workbook

*Develop Your Business Plan Format*



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)




# 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



# 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:			













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:**

**Current Liabilities:**

Cash-on-hand		Accounts Payable	
Accounts receivable		Credit Card Debt	
Merchandise Inventory		Installment Loans (i.e. auto)	
Supplies		Other _____	
<b>Total Current Assets</b>		<b>Total Current Liabilities</b>	

**Fixed Assets:**

Fixtures & Capital Imp.		Notes Payable to Others	
Building/Land		Bank Mortgages	
Equipment		Line of Credit	
Automobiles		Other _____	
Other _____		Other _____	
<b>Total Fixed Assets</b>		<b>Total Long-Term Liabilities</b>	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES</b>	

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