

# Innovation Growth Program (IGP)

## Application Support Document

**Please review and reference this document prior to submitting your application package. The yellow boxes provide tips and additional information to help you complete your application.**

### Section 1: MANDATORY APPLICATION REQUIREMENTS

All fields/documents must be accounted for when submitting an application package

<b>Eligibility Requirements - check off <i>before completing</i> the application</b>	
Confirm your eligibility for the program by reviewing each section below and indicating that you meet each requirement by clicking in the box in the right hand column –	
Applicant has reviewed the <a href="#">IGP application support document</a>	<input type="checkbox"/>
Applicant corporation is a for-profit taxable Canadian-controlled private corporation	<input type="checkbox"/>
Applicant corporation has a permanent establishment in Manitoba	<input type="checkbox"/>
Applicant corporation, and its affiliates on a consolidated basis, have annual revenue of \$15 million or less, <b>or</b> have fewer than 100 full time equivalent employees	<input type="checkbox"/>
Applicant corporation has owner investment of \$25,000 in cash equity invested in the business. Cash equity is defined as common or preferred share capital and / or retained earnings	<input type="checkbox"/>
Applicant corporation, and its affiliates on a consolidated basis, pay at least 50% of total salaries and wages to Manitoba residents	<input type="checkbox"/>
<b>Application Attachments - check off <i>before submitting</i> your completed application</b>	
Confirm that the following documents are attached with this application by clicking in the box in the right hand column:	
1- A completed Application Form in Microsoft Word	<input type="checkbox"/>
2- Most recent T2 tax return, or <a href="#">Start Up Letter</a> for new companies	<input type="checkbox"/>
3- Current balance sheet and income statement of the applicant (no older than 3 months)	<input type="checkbox"/>
4- Year-end Financial Statement including balance sheet and income statement of the applicant (for the last fiscal year)	<input type="checkbox"/>
5- Proof of matching project funding from non-government sources (i.e., bank statements or bank letters confirming secured financing, etc.)	<input type="checkbox"/>

Before completing this section, ensure you review:

1. The eligibility requirements for IGP
2. The documentation needed to support your application form

For any questions regarding documents, please contact the department at [ecdevprograms@gov.mb.ca](mailto:ecdevprograms@gov.mb.ca)

## Section 2: Company Information/General Business Overview

9 Digit Business Number	
Company's Legal Name:	
Company's Operating Name: (If different from Legal Name)	
Mailing Address:	<input type="text"/>
Physical Address: (if different from mailing address)	
Contact Person (name & title):	<input type="text"/>
Email Address:	
Phone Number:	

Identify company's full mailing address, including postal code.

**TIP:** It is beneficial to include a contact person that has signing authority or can legally bind the company.

Business Sector (required)	<input type="text" value="[Choose an item]"/>
Sub-Sector (if applicable)	<input type="text" value="Choose an item."/>
# Years in Business	

Select the sector/sub-sector that best represents your company from the drop-down menus. If your sector is not listed, select "Other" in both the "Business Sector" and "Sub-Sector" drop-down menus.

Describe the management team, including experience, and capacity to carry out the project.

<input type="text"/>
----------------------

Use the last question to let the reviewers know more about your company and your team's capacity to carry out the project.

**TIP:** Include years of experience, similar projects you managed, job titles of management team members, what prior experience each team member has.

**TIP:** A very brief bio of each leadership team member can be used to answer the question.

## Section 3: Product / Process Description and Market Environment

Briefly describe the product or process for which you are requesting funding: (Maximum 1-2 paragraphs)

Describe your innovative product or process in easy to understand terms. Demonstrate a clear and comprehensive description of the proposed innovation.

What makes your product or process innovative? ([See section 3 of Application Support Document](#))

### **Innovation is:**

Significant modifications to existing products or processes that are applied in a setting or condition for which current technology applications are not possible or feasible; or

An improvement to an existing technology/process that represents a significant (generally patentable) improvement in functionality, cost or performance of goods and services that are considered state of the art or the current industry best practice.

### **Innovation is not:**

Incremental improvements, "good engineering" and technologies that would go ahead in a normal course of product development (i.e., the next version or release).

Describe your target market for your product: Who is your customer? What is the size of your target market in dollars (\$) ? Include evidence to support your claims.

Describe the benefits of your process innovation: increased efficiency, reduced waste, improve customer service, etc.)

Who is your product or process going to target?

**TIP:** The reviewer is not only looking to see that you have done research into the size of the market, but also research into what portion of the market your product will disrupt.

Demonstrate briefly that your company understands how to begin disrupting the market it serves, and in the process increase your company's market share *or* bring new people into the market.

\*You will be expanding on this in a later question.

Describe the competitive environment for your product or process. Outline key competitors, your competitive advantage, and what share of the market you plan to capture.

Expand on how you will disrupt the market.

**TIP:** Show evidence that you have researched key competitors and outline what "piece of the pie" your innovation plans to capture/disrupt. Explain why customers will chose your product or process.

Describe the commercialization plan for your product; i.e., how you plan to capture your targeted market share. Please include a timeline for each stage.  
(2–3 paragraphs)

Explain how you plan to take your product to market.

What marketing activities will you undertake to let people know about your product? E.g., tradeshow, advertising, demonstration projects, trials, pilot project with clients, social media, test drive product.

**TIP:** If your company has a marketing plan developed, include it in your application package as an alternative to completing this question.

## Section 4: Funding Request and Project Details

Amount of IGP Funding Request	\$
-------------------------------	----

Provide a brief description of the specific project and project activities you propose to undertake with IGP funding. (Maximum 2–3 paragraphs)

Project activities **must be completed (incurred and paid) within one year** as defined in the contribution agreement. Project activities must align with eligible costs ([see Section 4 of Application Support Document](#)) for this program

The IGP provides a non-repayable grant of up to \$100,000 per project to cost share eligible expenses on a 50/50 cost shared basis. The amount you are requesting should be half of the Eligible Costs identified. The project budget section includes other costs which are not eligible but are part of the total project costs.

**Examples of eligible costs and activities include:** legal fees associated with registration of intellectual property, designing and building of prototypes, tools, moulds, testing costs, certifications, product modifications for a new market, third party advisory or technical services, business-to-business tradeshow or events intended to secure distributors, internal labour of net new Manitoba hires directly working on the project (capped at 50% of total funding received under IGP).

Use the chart below to provide an overview of the overall costs associated with the IGP project you have identified. Please complete all areas that apply to your funding request.

Type of Activity	Total Activity Cost	Source of Funding					Estimated timeline for this stage (date - date)
		IGP Contribution	Applicant Contribution	Other Manitoba Government Funding	Other Public Funding	Private Contribution	
<i>Development of new innovative products or processes – excluding internal labour</i>							
Prototype building	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tooling and moulds for prototype or production	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Testing & Operational Trial Runs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Obtaining certification	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Registering intellectual property	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other - (Please describe) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Commercializing market ready innovative products or processes – excluding internal labour</i>							
Adaption costs for new markets (i.e., packaging, translation, new patents, testing or certification)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Market development / expansion (including tradeshow costs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other - (Please describe) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Internal Labour Costs – Project Specific</i>							
New Hires (MB) – IGP eligible	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Internal Labour (MB) – IGP ineligible	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total \$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

In this section, identify total project costs including IGP funding at the 50% company contribution. Itemize costs to the best of your ability and identify other funding sources that will be used.

Any expenses not listed on the chart can be entered under “other”

### Project Financing and Funding Sources

Public or Private Funds	Nature of Funding Please include: Name of Program / Partner & Type of Funding – i.e., investment, grant, loan, forgivable loan, subsidy, etc.	Amount	Confirmed or Pending
<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"/>

List all funding sources referenced in your expense table. Identify if it is confirmed or pending. Only confirmed funding can be used for the 50/50 match contribution; however, including your pending funding in this application will help the reviewer understand your project.

### Section 5: Proposed Economic Benefits of Project

For the corporation, please indicate:

Anticipated Economic Impacts	Estimated total annual sales (\$)	Sales exports outside of Manitoba (\$)	Leveraged Funding - Other government	Leveraged Funding - Private	Purchases from Manitoba suppliers
<b>Current year</b>	\$ ]	\$ ]	\$ ]	\$ ]	\$ ]
<b>1 year from now</b>	\$ ]	\$ ]	\$ ]	\$ ]	\$ ]
<b>2 years from now</b>	\$ ]	\$ ]	\$ ]	\$ ]	\$ ]
<b>In 5 years</b>	\$ ]	\$ ]	\$ ]	\$ ]	\$ ]

For the corporation, please indicate:

Manitoba Employment Table	Full-time (#)	Part-time (#)	Contract (#)	Non Manitoba Based	Total Internal Manitoba Labour Expenses (Annual Salaries and Benefits from T4s)
<b>At Present (Pre-project)</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ ]
<b>1 year from now</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ ]
<b>2 years from now</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ ]
<b>In 5 years</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ ]

Complete chart to the best of your knowledge.

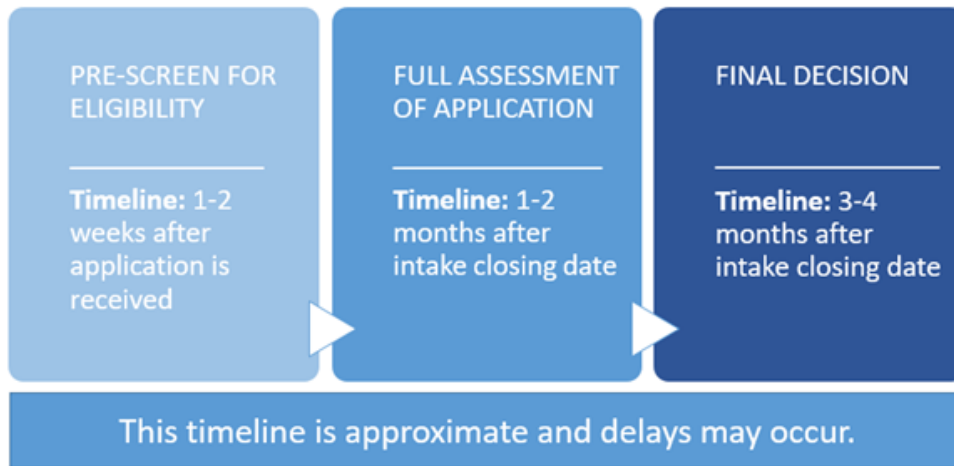
## Section 6: Disclosure and Authorization

<p><i>(Required)</i>  <b>VERIFICATION:</b> <i>Please sign and date.</i></p> <p>By submitting this application to Manitoba, the company verifies that all information provided in this application is correct.</p>	Please print Name
	Date

Please submit an electronic copy of your completed IGP Application, with the necessary supporting documentation to:  
 Innovation Growth Program (IGP)  
 Manitoba Economic Development, Investment and Trade  
 Email: [ecdevprograms@gov.mb.ca](mailto:ecdevprograms@gov.mb.ca)  
 Phone : 204-945-2475

Read the disclosure and authorization section. Type your name and date into the verification box to confirm all information is correct before submitting your application to the email address above. If you require your documents to be submitted through a secure channel other than Government of Manitoba email, please contact the department at the email listed above.

**TIP:** Review the Mandatory Application Requirements in Section 1 before submitting your package.



Please reference the above timeline for application processing. You will only be contacted during this process if your application is missing information.