



Business Plan to accompany
Application for a Motor Vehicle Licence by a Corporation

1. CORPORATION DETAILS

Please note:- The Commissioner will only receive & consider completed applications.
If insufficient space is given to provide answers or information, attach additional pages specifying
the relevant material.

_____ corporation
(full registered name of corporation)

whose registered address is _____

Telephone number _____

2. Trading name under which business as a Dealer to be conducted - (copy of certificate of registered business
name to be provided including evidence of proprietorship of business name)

3. Type of Business - (describe activities inclusive of whether there is any proposal to carry on business in partnership)

4. Describe product to be marketed - (price range of vehicles, type, new or used or mix of both, age etc)

5. Business Objectives - (detail what is realistically expected to be achieved in the next year and the strategy to reach
targets)

6. Personnel required: (list in detail the key personnel required for the success of the business)

Table with 3 columns: Position, No. of Persons, Salary. Includes two rows of blank lines for data entry.

7. How would absence due to illness and/or injury of any key personnel be handled?

8. **List in detail for each category; location, space required (m2), approximate cost (to purchase or lease)**

Accommodation:

Forecourt display/sales area - _____

Office - _____

Workshop - _____

9. **List items required under each heading giving the following details; approximate cost, estimated life, availability, etc.**

Plant & Equipment

Vehicles

Office Furniture & Equipment

10. **What typical costs might be incurred in providing services to the targeted market?**

Type \$ _____

(a) Sales _____

(b) Warranty/After Sales _____

(c) Other _____

11. **Estimated financing required for 1st year**

Trading name: _____

Fixed assets to be purchased \$ _____

Stock, Plant & Other Equipment (attach list) \$ _____

Fixtures, Fittings, Furnishings (attach list) \$ _____

Accommodation \$ _____

Preliminary Costs \$ _____

Personal Living Costs \$ _____

Payments to Suppliers \$ _____

Payment of Expenses \$ _____

Income Tax Payments \$ _____

TOTAL \$ _____

12. Cash flow forecast notes

The cash flow forecast statement is a summary of the information built up on detailed work sheets which must be prepared on a monthly basis for the first year of operation. The monthly estimates should take into account the seasonal effects on sales.

Month 0	Is the period prior to trading commencing. Capital Expenditure, Preliminary Expenses and Personal Commitments.
Month 1	Would be the first month of trading.
Receipts from credit customers	Would take into account the time delay in customers making payment. On the basis that trading terms would be 30 days from the date of the statement, the average delay should be taken as 60 days after the month of sale for cash receipts.
Capital Expenditure	Should be shown in the month when the account is expected to be paid. This category would include the purchase of any fixed assets such as the following items: <ul style="list-style-type: none">. Accommodation (Offices, forecourt, workshop etc). Motor Vehicles. Plant & Machinery. Office Equipment
Payment to Suppliers	Should be shown in month payment is expected to be made regardless of when goods are received.

ESTIMATED MONTHLY CASH FLOW FORECAST FOR 1ST YEAR

Trading Name: _____

Monthly	Estimated Receipts						Estimated Payments					
	A	B	C	D	E	F	G	H	I	J	K	L
0												
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
Total												

- | | |
|--------------------------------------|-----------------------------|
| A. Cash Sales | H. Payments of Expenses |
| B. Receipts from Credit Customers | I. Preliminary Expenses |
| C. Receipts from Other Income | J. Personal Commitments |
| D. TOTAL Receipts | K. Net Surplus (deficiency) |
| E. Income Tax | L. Progressive Surplus |
| F. Payment to Suppliers (deficiency) | |
| G. Payments - Capital | |

13. Estimated annual operating expenses for 1st 12 months

Trading Name: _____

Operating Expenses:

Advertising/Promotional Activities	\$ _____
Bank Charges	\$ _____
Courier Fees	\$ _____
Depreciation - Motor Vehicles	\$ _____
Depreciation - Other	\$ _____
Freight & Cartage	\$ _____
Hire & Plant Equipment	\$ _____
Insurance	\$ _____
Leasing Plant & Equipment	\$ _____
Licences & Registrations	\$ _____
Light & Power	\$ _____
Loose Tool Replacements	\$ _____
Motor Vehicle Running Expenses	\$ _____
Postage	\$ _____
Printing & Stationary	\$ _____
Promotional Expenses	\$ _____
Rent of Business Premises	\$ _____
Repairs & Maintenance	\$ _____
Tax Agents Fees	\$ _____
Telephone	\$ _____
Wages	\$ _____
Other Material Costs	\$ _____
TOTAL	\$ _____

14. Business Establishment Costs

Costs of Licences	\$ _____
Council Fees	\$ _____
Department of Industrial Relations Fees	\$ _____
Business Name Registration	\$ _____
Legal Fees - for lease	\$ _____
- for agreements	\$ _____
Rent (4 weeks in advance)	\$ _____
Insurance (12 months in advance)	\$ _____
Signage	\$ _____
Business Association	\$ _____
Others	\$ _____
	\$ _____
	\$ _____
TOTAL	\$ _____

I/We declare that the details given in this business plan are true and correct and note that under section 8 of the Act, should I/We furnish information or give an answer which is false or misleading in any material particular, I/We shall be liable to be prosecuted for an offence to which a penalty of \$20 000 or imprisonment for 3 years applies.

signature of director/s

name of director/s

Dated this _____ day of _____ 20____

Dated this _____ day of _____ 20_____.

Lodgement by Mail

Consumer Affairs
GPO Box 1722
Darwin NT 0801
Ph: (08) 8999 1999
Fax: (08) 8935 7727

DARWIN
Development House
76 The Esplanade
Darwin NT 0800
Ph: (08) 89821700
Fax: (08) 89821725

Lodgement by Hand Territory Business Centres

KATHERINE
1 Randazzo Building
18 Katherine Terrace
Katherine NT 0850
Ph: (08) 8973 8180
Fax: (08) 8973 8188

TENNANT CREEK
Shop 2, Barkly House
Cnr Paterson & Davidson St
Tennant Creek NT 0860
Ph: 08 8962 4411
Fax: 08 8962 4413

ALICE SPRINGS
Peter Sitzler Building
67 North Stuart
Highway
Alice Springs NT 0870
Ph: (08) 8951 8524
Fax: (08) 8951 8533

Office Use

CABA: Licensing – Consumer and Business Affairs
Act: *Consumer Affairs and Fair Trading Act*
Regulations: Motor Vehicle Dealers Regulation 1992

Last Updated: December 2005
Regulation: 6

PRIVACY STATEMENT

Consumer and Business Affairs complies with the Information Privacy Principles scheduled to the Information Act.
To view the Consumer and Business Affairs Privacy Statement, please access www.caba.nt.gov.au or 08 8999 1999