SEAFOOD ACCELERATOR PROGRAM PRODUCT DEVELOPMENT AND TECHNICAL SUPPORT FUNDING



DEADLINE: Intake is ongoing until funds are fully subscribed.

Company Name:				
NS Registry of Joint Stock Companies	f (if registered):			
Contact Name:				
E-mail Address:	Telephone:			
CIVIC ADDRESS				
Street:	Province:			
Town:	Postal Code:			
MAILING ADDRESS (IF DIFFERENT TH	AN CIVIC ADDRESS)			
Street:	Province:			
Town:	Postal Code:			
If applicable, indicate Department of F	sheries & Aquaculture-issued license type and number (i.e., aquaculture lease			

and operation, fish buyer, fish processing):

If applicable, indicate SFC license number:

PLEASE INDICATE WHETHER THE APPLICATION IS A REQUEST FOR ASSISTANCE WITH A NEW, OR EXISTING PRODUCT?

Please indicate whether the application is for a new or existing product: New Existing

Please provide a product description:

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Please indicate existing or intended markets:

Provincial	Domestic	International	Retail			
Foodservice	No sales yet					
FOR NEW PRODUCTS						
Please indicate the production activity the application request falls under/is related with:						
Primary processing (i.e., handling raw, unprocessed fish and seafood products)						
Secondary processing (i.e., handling raw or cooked, partially processed fish and seafood products)						
Value-added processing (i.e., combining fish and seafood products with other ingredients)						
Please indicate the steps in the commercialization cycle already completed (check all that apply):						
Idea Generated	Business Pl	an Completed E	Brand Developed			
Marketing Plan Completed	Financing lo	dentified I	Recipe/Process Established			
Product Food Safety Revie	wed Ingredient	Ingredient and Packaging Suppliers Secured				
Product Labels Created	Scale-up M	Scale-up Manufacturing Established				
Food Safety Management	System Developed					

FOR EXISTING PRODUCTS

Please describe the technical issue you are experiencing:

Please describe your desired outcome:



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FOR ALL APPLICANTS

Please indicate what activities are requested under this application (check all that apply):

Market Assessment		Recipe Development and O	ptimization	
Food Safety/Regulatory	Review	Process Development and C	Optimization	
Analytical Testing Supporting Product Development		Packaging Optimization	Packaging Optimization	
Prototype Development		Label Review and NFt Deve	Label Review and NFt Development	
Shelf Life Evaluation				
HNICAL SUPPORT				
Post-harvest handling practices of fish and seafood		Fish processing techniques	Fish processing techniques and technologies	
Seafood product development		Fisheries bioresource utiliza	Fisheries bioresource utilization	
ailable, the following are	requested to be provided with th	e application:		
Business Plan	Marketing Plan	Product Specifications	Product Image	

PROCESS

The first step in the process is to have the application reviewed for approval. Once approved, you will receive an email or phone call to discuss the details. This will be followed by an approval email and quote. After the applicant approves and signs the quote, they will be required to pay 20% upfront prior to the work being scheduled.

SUBMIT COMPLETED APPLICATIONS TO ASHLEY SPRAGUE: ASPRAGUE@PERENNIA.CA

FOR INTERNAL USE ONLY				
Incomplete	Complete	Approved		
Date				
Project Number				
Date Received				
Status				
Total Amount of Funding Awarded				



