



## KWAZULU-NATAL PROVINCE

ECONOMIC DEVELOPMENT, TOURISM  
AND ENVIRONMENTAL AFFAIRS  
REPUBLIC OF SOUTH AFRICA

# OPERATION VULA FUND

Tier 1 Application Form  
Informal Economy  
(R1.00 - R50 000,00)

*This form is to be used for funding application below fifty thousand rand (R50 000.00) only.*

## GENERAL INFORMATION

1. Read all questions and requirements carefully before completing the application form. You are free to add additional paper where there is a need.
2. Ensure all information provided is correct. Applications containing false information will automatically be disqualified.
3. Ensure that you have made a copy of your application, including all your attachments.
4. Ensure that you have attached all the required information to your application and ticked it off on the checklist.
5. Make sure that you clearly indicate the exact total amount of your request, according to your submitted quotations.
6. The Department of Economic Development, Tourism and Environmental Affairs (EDTEA) must be notified in writing regarding any change in the applicant's address, phone number, fax number and email address. **EDTEA will not be held responsible if the applicant is not reachable.**
7. The closing date for the submission of applications is **20 June 2023 at 16H00**. Applicants are urged to adhere to the specified deadline, as applications received by the Department after the deadline will not be evaluated. The Department will not take responsibility for external factors that may render applications being received after the deadline.
8. Completed applications must be submitted at the **EDTEA Head Office** at 270 Jabu Ndlovu Street, Pietermaritzburg or at the **EDTEA District Offices**.
9. Applications submitted through emails, fax, and registered mails will not be considered. The department takes zero responsibility for collection of the mails
10. The department pledges to adhere to a free and fair application process in line with the EDTEA Funding Policy.
11. All information will be treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of the business, except in so far as it may be required and permitted by law.
12. Due to the high volume of applications anticipated, the communication will be limited to the applicants that are through to the next phase of assessment.
13. The Department does not charge a fee for application forms.



**KWAZULU-NATAL PROVINCE**

ECONOMIC DEVELOPMENT, TOURISM  
AND ENVIRONMENTAL AFFAIRS  
REPUBLIC OF SOUTH AFRICA

**OPERATION VULA FUND**

Tier 1 Application Form

Informal Economy

(R1.00 - R50 000,00)

*This form is to be used for funding application below fifty thousand rand (R50 000.00) only.*

**SECTION A: BUSINESS DETAILS**

|                                                                                               |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
|-----------------------------------------------------------------------------------------------|--|---------------------|-------------|-----------------|------|-------------------------------------|-------------------------|----------|--------------------------------|--------------------|---------------------|----|
| <b>Name of Business</b>                                                                       |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| <b>Trading Permit Number</b>                                                                  |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| <b>Main Applicant Full Names</b>                                                              |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| <b>Identity Number</b>                                                                        |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| <b>Gender</b><br><i>(tick ✓ the appropriate box)</i>                                          |  | Female              |             |                 | Male |                                     |                         | Other:   |                                |                    | <b>Age</b>          |    |
| <b>Population Group</b><br><i>(tick ✓ the appropriate box)</i>                                |  | African             |             | White           |      | Indian                              |                         | Coloured |                                | Other:             |                     |    |
| <b>Disability Status</b><br><i>(tick ✓ the appropriate box)</i>                               |  | Yes                 |             | No              |      | If yes, indicate the disability     |                         |          | <b>Military Veteran</b><br>(✓) |                    | Yes                 | No |
| <b>Applicant's Position/ Role in the business</b>                                             |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| <b>E-mail</b>                                                                                 |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| <b>Tel</b>                                                                                    |  |                     | <b>Cell</b> |                 |      | <b>Alt</b>                          |                         |          |                                |                    |                     |    |
| <b>Physical Business Address</b>                                                              |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
|                                                                                               |  |                     |             |                 |      |                                     |                         |          |                                | <b>Postal Code</b> |                     |    |
| <b>District:</b>                                                                              |  |                     |             |                 |      | <b>Local Municipality:</b>          |                         |          |                                | <b>Ward Number</b> |                     |    |
| <b>City/Town:</b>                                                                             |  |                     |             |                 |      | <b>Province:</b>                    |                         |          |                                |                    |                     |    |
| <b>Name of the Nearest Landmark</b> <i>(school, hall, etc):</i>                               |  |                     |             |                 |      | <b>Area Type</b><br><i>(tick ✓)</i> | City                    | Town     | Rural                          | Township           | Informal Settlement |    |
| <b>Describe the premises your business operates from:</b> <i>(tick ✓ the appropriate box)</i> |  |                     |             |                 |      |                                     |                         |          |                                |                    |                     |    |
| Street or street corner                                                                       |  | I sell door to door |             | Incubator       |      | Shop in a complex                   |                         |          |                                |                    |                     |    |
| Stall in a market place                                                                       |  | House               |             | Back yard       |      | Part of the office block            |                         |          |                                |                    |                     |    |
| From a container                                                                              |  | Part of a House     |             | Standalone shop |      | Other: _____                        |                         |          |                                |                    |                     |    |
| <b>Business Occupation Status</b><br><i>(tick ✓ the appropriate box)</i>                      |  |                     | Rent        |                 | Own  |                                     | Other: <i>(specify)</i> |          |                                |                    |                     |    |

## SECTION B: PREVIOUS FUNDING INFORMATION

Have you ever received business funding before from government/entities? If yes, please fill in the details below.

| Amount Funded | Name of the Funder | Details of what was funded |
|---------------|--------------------|----------------------------|
| R             |                    |                            |
| R             |                    |                            |
| R             |                    |                            |

## SECTION C: SECTOR INFORMATION

Specify type of business:

Brief description of the Business:

(a) Your business (products/services offered)

|  |
|--|
|  |
|  |
|  |
|  |
|  |

(b) Who are your customers?

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |

(c) How long has the business been operating?

|  |
|--|
|  |
|  |
|  |
|  |
|  |

(d) How do you deliver your products or services?

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**SEC JOB CREATION INFORMATION**

|                                                                  | Total | Gender |        |       | Youth<br>(Age 35 &<br>below) | People with<br>Disabilities | Military<br>Veterans |
|------------------------------------------------------------------|-------|--------|--------|-------|------------------------------|-----------------------------|----------------------|
|                                                                  |       | Male   | Female | Other |                              |                             |                      |
| How many full-time employees does the business currently employ? |       |        |        |       |                              |                             |                      |
| How many full-time jobs will be sustained?                       |       |        |        |       |                              |                             |                      |
| How many new full-time jobs will be created?                     |       |        |        |       |                              |                             |                      |
| How many part-time employees does the business currently employ? |       |        |        |       |                              |                             |                      |
| How many part-time jobs will be sustained?                       |       |        |        |       |                              |                             |                      |
| How many part-time jobs will be created?                         |       |        |        |       |                              |                             |                      |

*Note: Please report in numbers*

**SECTION E: BUSINESS CONCEPT MOTIVATION**  
Provide a brief business plan (If you have it) with the following minimum information,

**Financial Forecast** (incl. Turnover, Cost of Sales, Gross Profit, Operating Expenses, Net Profit)

|                                   | Previous Year | Current Year | Year 1 projections |
|-----------------------------------|---------------|--------------|--------------------|
| <b>Total Business Income</b>      | R             | R            | R                  |
| <b>Total Business Expenditure</b> | R             | R            | R                  |
| <i>Cost of Sales</i>              | R             | R            | R                  |
| <i>Operating Expenses</i>         | R             | R            | R                  |
| <b>Net Profit</b>                 | R             | R            | R                  |

**Motivation for Grant Funding** (why do you need this funding?)

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

| Detailed Utilisation of Grant Funding |                           |   |  |  |          |  |                              |  |   |
|---------------------------------------|---------------------------|---|--|--|----------|--|------------------------------|--|---|
| Required grant amount:                | Tier 1<br>R1.00 – R50 000 | R |  |  |          |  |                              |  |   |
| Item(s) requested                     |                           |   |  |  | Quantity |  | Estimated Amount of the Item |  |   |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |
|                                       |                           |   |  |  |          |  |                              |  | R |

### SECTION F: SUPPORTING DOCUMENTS REQUIRED

*To be submitted with the application form.*

| #  | Detailed checklist:                                     | Tick ✓ the correct box if included |
|----|---------------------------------------------------------|------------------------------------|
| 1. | Application Form fully completed and signed             |                                    |
| 2. | Completed <i>SECTION E: BUSINESS CONCEPT MOTIVATION</i> |                                    |
| 3. | Complete and Signed Declaration (ANNEXURE A)            |                                    |
| 4. | Copy of Valid Trading Permit                            |                                    |
| 5. | Identity Document (ID) Copies of all members            |                                    |
| 6. | Attach Quotations for All Items Requested               |                                    |

### SECTION G: PERSONAL INFORMATION COLLECTION NOTICE AND CONSENT

Please be advised that by completing this form the Applicant and all entities and or individuals referred to herein acknowledge that their personal information (hereinafter referred to collectively as “your/your personal information”) will be required to be disclosed and processed for consideration under the grant funding contemplated herein to conduct all necessary background checks required in accordance with South Africa’s Anti-Money Laundering Legislation and FICA processes in-order to assess your creditworthiness, conduct criminal checks, investigate prior convictions and judgements, validate all educational certification and employment history, interrogate any other information provided in support of this application.

In this regard, please note the following in accordance with Protection of Personal Information Act 4 of 2013, as amended from time to time:

- The processing of your personal information complies with obligations imposed by law.
- Your personal information shall not be retained any longer than is necessary for achieving the purpose for which the information was collected and all records of your personal information shall be deleted within 45 days as same is no longer required.
- The integrity of all personal information and authorized Responsible Party and or Data Processor is protected by taking appropriate, reasonable technical and organizational measures to prevent loss, damage unauthorized destruction, unlawful access to or processing of personal information.
- You have the right to access and rectify the information collected, including information about the identity of all 3<sup>rd</sup> parties who have access to the information.

## SECTION H: DECLARATION

- 1) The Applicant expressly agrees and warrants to provide the personal information for the purposes set out above.
- 2) All information provided in this document and all auxiliary documentation including but not limited to the Business Plan is true, accurate and complete.
- 3) No litigation, arbitration or liquidation, sequestration or business rescue proceedings are present, pending or threatened against it. If any such is present, pending or threatened full details should be disclosed in this application.

YES

NO

**Applicant's Signature:**

**Date:**

## ANNEXURE A: DECLARATION OF INTEREST

### 1. PURPOSE OF THE FORM

Any person (natural or juristic) may make an offer in terms of this application for grant funding. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa and further expressed in various pieces of legislation, it is required for the members/directors to make this declaration in respect of the details required hereunder.

### 2. DECLARATION

2.1 Are you employed by the state? *(Please tick ✓ where relevant)*

YES |  NO

If yes, please provide details: \_\_\_\_\_

2.2 Do you have a relationship with any person employed by the Department of Economic Development, Tourism and Environmental Affairs? *(Please tick ✓ where relevant)*

YES |  NO

2.2.1 If so, furnish particulars:

| Full Name | Relationship (briefly explain) |
|-----------|--------------------------------|
|           |                                |
|           |                                |
|           |                                |
|           |                                |

**Applicant's Signature:**

**Date:**