



KWAZULU-NATAL PROVINCE

ECONOMIC DEVELOPMENT, TOURISM
AND ENVIRONMENTAL AFFAIRS
REPUBLIC OF SOUTH AFRICA

OPERATION VULA FUND

Tier 2 Application Form (R50 000.01 - R300 000.00)

This form is to be used for funding application exceeding fifty thousand rand and one cent (R50 000.01) but below three hundred thousand rand (R300 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 2 Application Form
(R50 000.01 - R300 000.00)***This form is to be used for funding application exceeding fifty thousand rand and one cent (R50 000.01) but below three hundred thousand rand (R300 000.00) only***SECTION A: BUSINESS DETAILS**

Name of Business (as per registration documents)																																													
Business Registration Number																																													
Legal Entity Type (tick ✓ the appropriate box)	CC		(Pty) Ltd		Co-op		Sole Proprietor		NGO		CBO		Other (specify):																																
How long has your business been in operation?																																													
Is the business up to date with the submission of annual returns?		Yes	No	If yes, provide valid SARS Tax Clearance/Pin																																									
Main Applicant Full Names																																													
Identity Number																																													
Gender (tick ✓ the appropriate box)	Female		Male		Other:							Age																																	
Population Group (tick ✓ the appropriate box)	African		White		Indian		Coloured			Other:																																			
Disability Status (tick ✓ the appropriate box)	Yes	No	If yes, indicate the disability								Military Veteran	Yes	No																																
Applicant's Position/ Role in the business																																													
E-mail																																													
Tel																Cell														Alt															
Physical Business Address														Postal Code																															
District:				Local Municipality:								Ward Number																																	
City/Town:				Province:																																									
Nearest Landmark (school, church, hall, etc.)				Area Type (tick ✓ the appropriate box)		City	Town	Rural	Township	Informal																																			
Business Occupation Status (tick ✓ the appropriate box)		Rent		Own		Other (specify):																																							

SECTION B: PREVIOUS FUNDING INFORMATION

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

Amount Funded	Name of the Funder	Details of the Funded Project
R		
R		
R		

SECTION C: OWNERSHIP INFORMATION

Members/Partners

Notes

- Please tick ✓ the appropriate boxes
- Attach ID copies of all members

Name & Surname	Youth (yes/no)		Population Group <i>Black (B), White (W), Indian (I), Coloured (C) & Other (O)</i>					Gender (Male (M), Female (F) & Other (O))			Military Veteran (yes/no)		Disabled (yes/no)		ID Number	Shareholding %	
	Y	N	B	W	I	C	O	M	F	O	Y	N	Y	N			
1.																	
2.																	
3.																	
4.																	
5.																	
6.																	
7.																	
8.																	
9.																	
10.																	
11.																	
12.																	

Note: (a) Please attach the curriculum vitae (CVs) and ID copies of all members/partners in the business.

(b) The applicant may submit additional information separately where the space provided above is not sufficient.

SECTION D: SECTOR INFORMATION

Sectors (tick ✓ the appropriate box)		
Tourism & Hospitality – accommodation, adventure, sport, cultural tourism, restaurant, events, catering etc.	<input type="checkbox"/>	Green Economy – renewable energy, recycling, biomass, freshwater, forestry, fisheries,
Agriculture and Agribusiness – crops, livestock, poultry, horticulture, dairy farming, forestry, etc.	<input type="checkbox"/>	Science, Technology and Innovation – ICT and research, Business Process Outsourcing (BPO)
Transport and Logistics – Warehousing, courier and express, land transportation, container, packaging, etc.	<input type="checkbox"/>	Mining and Mineral Beneficiation – aluminium, coal, iron, steel, phosphates and mineral sands
Manufacturing – textile, clothing, footwear, leather, pulp, paper and furniture, chemicals, detergents, etc.	<input type="checkbox"/>	Blue Economy – maritime and related fields
Aquaculture Development - breeding, raising, and harvesting fish, shellfish, aquatic plants, etc.	<input type="checkbox"/>	Retail – fuel, food, clothing, tuck-shop, etc.
Creative Industry - visual arts, like painting. Crafts, such as weaving, jewellery-making. Film, TV, animation, visual effects, video, radio and photography, etc.	<input type="checkbox"/>	Other* (specify) – security, construction, services, driving school, crèche etc.

Brief description of the Business:

(a) Your business (products/services offered)

(b) The need the business seeks to satisfy/address

(c) Who are your customers?

(d) Where do you operate from?

(e) How do you deliver your products/services to your customers?

SECTION E: JOB CREATION INFORMATION

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

Note: Please report in numbers

SECTION F: BUSINESS CONCEPT MOTIVATION

Please attach the business plan with the following minimum information

- Business Description, Brief History, District, Key Suppliers, etc.
- Analysis of Market, Customers and Competitors
- Overview of Operational/Production Process
- Human Resources (*Company organogram*)
- Marketing and Sales Approach
- Key Risks and Mitigations (how would reduce the risk)
- Financial Forecast (*incl. Turnover, Cost of Sales, Gross Profit, Operating Expenses, Net Profit*)

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

SECTION G: 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.	Application form sign by all members/partners, if applicable (<i>SECTION I: DECLARATION</i>)						
3.	Signed Resolution for members/partners (<i>ANNEXURE A</i>)						
4.	Complete and Signed Declaration of Interest by members/partners (<i>ANNEXURE B</i>)						
5.	Business Plan attached						
6.	Business Registration Documents						
7.	Members disclosure/ Cooperative constitution/ Articles or memorandums of association						
8.	Shareholder's certificate showing full details of shareholders						
9.	Valid SARS Tax Clearance/Pin						
10.	ID copies of all members or directors						
11.	Short CVs of the management team (<i>key personnel</i>)						
12.	Copy of BBBEE Certificate/ Sworn Affidavit						
13.	Business bank statements for the past six (6) months						
14.	Copy of Legal supporting documentation for environmental authorisation, development and other approvals, if applicable. <i>Specify the document:.....</i>						
15.	Copy of Lease /Title Deed/Rental Payments/Permission to Occupy (PTO) – if Applicable (<i>contracts must not be less than 5 years</i>)	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">Lease</td> <td style="width: 20px; text-align: center;">Title Deed</td> <td style="width: 20px; text-align: center;">Rental Payments</td> <td style="width: 20px; text-align: center;">PTO</td> <td style="width: 20px; text-align: center;">Other:</td> </tr> </table>	Lease	Title Deed	Rental Payments	PTO	Other:
Lease	Title Deed	Rental Payments	PTO	Other:			
16.	Attach quotations for all items requested						

SECTION H: 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 3rd parties who have access to the information.

SECTION I: DECLARATION

The applicant and all entities and or individuals represented in this application expressly agree and warrant that:

- 1) All information provided in this document and all auxiliary documentation including but not limited to the Business Plan is true, accurate and complete.
- 2) 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.

	FULL NAMES OF ALL MEMBERS	CONTACT DETAILS	SIGNATURE	DATE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
Applicant's Signature:		Date:		

ANNEXURE A: DIRECTORS/MEMBERS RESOLUTION

WRITTEN RESOLUTIONS OF THE DIRECTORS/ MEMBERS OF THE BUSINESS

Resolved that

1. _____ (*main applicant's full names*)
of _____ (*business name*) be and
is hereby authorised and empowered to:
 - 1.1. Negotiate, settle the terms of and sign the documents and all other deeds, certificates, notices, documents or powers of attorney which may be necessary for the implementation of the documents and to finalise and sign any document for purposes hereof;
 - 1.2. Sign and/or despatch any notice and all other documents and notices to be signed and/or despatched by or on behalf of _____ (*business name*);
 - 1.3. Amend the documents; and
 - 1.4. Generally, do everything that may be necessary for the implementation of the documents.
2. Any agreements, deeds of documents signed by an *authorised signatory* acting under the authority of this resolution, shall conclusively be deemed to be the documents authorised by this resolution.
3. To the extent that an *authorised signatory* has already signed all or any of the documents and/or any other deeds, certificates, notices, documents or powers of attorney which may be necessary for the implementation of the abovementioned agreements on behalf of _____ (*business name*), his/her actions in this regard be and are hereby ratified.

Member/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:
Member/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:
Member/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:
Member/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:
Member/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:
Member/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:

Note: The applicant may make a copy of this page if the space provided above is not sufficient.

ANNEXURE B: DECLARATION OF INTEREST BY MEMBERS

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. MEMBERS DECLARATION

2.1 Is the business, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the business, employed by the state? *(Please tick ✓ where relevant)*

YES | NO

2.1.1 If so, furnish particulars of the names, individual identity numbers, and, if applicable, state employee numbers of sole proprietor/ directors / trustees / shareholders / members/ partners or any person having a controlling interest in the business, in table below.

Full Name	Identity Number/Employee No.	Name of State institution

2.2 Do you or any member/partner have a relationship with any person who is 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)

Main Applicant's Signature:

Date: