

OPERATION VULA FUND Tier 3 Application Form

(R300 000.01 - R2 000 000.00)

This form is to be used for funding application exceeding three hundred thousand rand and one cent (R300 000.01) but below two million rand (R2 000 000.00) 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 <u>received</u> 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.



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SECTION A: BUSINES	S AND) AI	PLI	CANT	DETA	ILS											
Name of Business (as per registration documents)																	
Business Registration Number																	
Main Applicant Full Names																	
Identity Number																	
Gender (tick ✓ the appropriate box)	Fe	male	Э		Ma	ale		C	Other	:					Age		
Population Group (tick ✓ the appropriate box)	Afı	ricar	1	W	'hite	Ind	dian		Coloured Othe								
Disability Status (tick ✓ the appropriate box)	Υ	⁄es		ı	No	If yes, indica disabi	te the								lilitary eteran	Yes	No
Applicant's Position/Role																	
Legal Entity Type (tick ✓ the appropriate box)		(Pty) Ltd		Со-ор		Sole oprieto	or	N	GO		СВС)		ther pecify):			
How long has your busing	ness b	een	in op	eratio	n?								•				
Is the business up to submission of annual re			the	Ye	s No	If yes	s, prov	ide v	alid	SARS	S Ta	ax Cle	arand	ce/P	in		
E-mail							V	Vebs	ite								
Tel			C	ell							Alt						
Physical Business Address															•		
													Post	al C	ode		
District:	Local Municipality: Ward Number												•				
City/Town:			Pro	ovince) :												
Name of Nearest Landma church, hall, etc.)	ark (sch	hool,		Are	еа Туре	City	у	Т	own		F	Rural		Tow	nship	Info	rmal
Business Occupation St (tick ✓ the appropriate box)	R	ent		Own	C	Other	(spec	cify):	•			•					

Please indicate the nature of the company by ticking only one (1) of the boxes below. To qualify for a category you have to comply with at least two (2) of the set criterion.

Table 1: Business Category

Category	Organisation	Employees	Turnover	Assets	Tick Here
1.	Medium Enterprises	51 – 200	>R13mil – R51 mil	>R5mil – R19 mil	
2.	Small and Micro-Enterprises, Cooperatives, and Start-ups	0 – 50	≤R13 mil	≤R5 mil.	
3.	Community Based Organisations (CBOs), Non-Government Organisation (NGOs)				
4.	Registered Trusts				
5.	Public Sector, Non-Profit Organisations and Social Enterprises				
6.	Partnership Funding/ Joint Ventures				

Please indicate the selected business sector by ticking only one (1) of the boxes below

Table 2: Business Sector

Table 2: Business Sector	
Sectors (tick ✓ the appropriate box)	
Tourism & Hospitality – accommodation, adventure, sport, cultural tourism, restaurant, events, catering etc.	Green Economy – renewable energy, recycling, biomass, freshwater, forestry, fisheries,
Agriculture and Agribusiness – crops, livestock, poultry, horticulture, dairy farming, forestry, etc.	Science, Technology and Innovation – ICT and research, Business Process Outsourcing (BPO)
Transport and Logistics – Warehousing, courier and express, land transportation, container, packaging, etc.	Mining and Mineral Beneficiation – aluminium, coal, iron, steel, phosphates and mineral sands
Manufacturing – textile, clothing, footwear, leather, pulp, paper and furniture, chemicals, detergents, etc.	Blue Economy – maritime and related fields
Aquaculture Development - breeding, raising, and harvesting fish, shellfish, aquatic plants, etc.	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.	Other* (specify) – security, construction, services, driving school, crèche etc.

SECTION B: CO	MPANY	DESCRIPTION										
1.1 Please indicate	ase indicate the company's area of specialization											
Sector		List of Products/Ser	List of Products/Service Offerings									
1.2 If applicable, p	lease inc	licate the company's exp	erience,									
Name of Initia	tive	Initiative Descrip	otion	Company's F	Role in Initiative	Dι	uration of Initiative					
1.3 Please state th	ne motiva	ation for the selection of	the site c	of operation								
				7								
1.4 Please state th	ne locatio	ons of other operating sit	tes of you	ır business, if a	ıny							
					-							
Places complete	cotions	1.5. 1.6 and coation M	ONI V :	applicant has	nartnar argani-	ations	involved					
-		1.5, 1.6 and section M		applicant has	partiler organiza	auons	ilivolved.					
1.5 Partners of the	e applica	nt participating in the bu		_	_		_					
		Partner 1	Pa	rtner 2	Partner 3		Partner 4					
Name of Organisat	tion											

En	tity Type						
Of	ficial address						
Co	ntact person						
Те	lephone number						
Fa	x number						
E-1	nail address						
Nu	mber of employees						
1.6	6 Please outline the par proposal/business	tners experience in busi	ness/work	of a similar r	nature, that could b	e bene	ficial to the
	Name of Initiative	Initiative Descri	iption	Partners r	ole in Initiative	Du	ration of Initiative
1							
2							
3							
4							

1.7 Please provide the names and details of the members/directors/shareholders/partners of your company

Members/Directors/Shareholders/Partners

Notes

Please tick

✓ the appropriate boxes

Attach ID copies of all shareholders and directors

	Name & Surname	(ye	uth es/n o)							Gender (Male (M), Female (F) & Other (O)			Military Vetera n (yes/no		able d s/no)	ID Number	Share-holding %
		Υ	N	В	W	Ι	С	0	M	F	0	Y	N	Υ	N		
1.																	
2.																	
3.																	
4.																	
5.																	
6.																	
7.																	
8.																	
9.																	
10.																	
11.																	

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

The applicant may submit additional information separately where the space provided is not sufficient

SECTION C: AIMS AND OBJECTIVES
1.1 Provide a detailed description of your business by outlining its aims and objectives.
1.2 Identify the needs or gaps to be addressed by your company through this application (problem statement).
SECTION D: UNIQUENESS AND INNOVATION
1.1 Why is your business different and why will it succeeds?
1.2 Is the proposal patented or registered with a copyright body? If yes, evidence must be provided
1.3 How long have you been in this type of business?
SECTION E: POLICY AND STRATEGIC ALIGNMENT
1.1 Is your proposal within a sector linked to the vision and mission of EDTEA? YES/NO. If yes, please state how

1.2 How will your proposal contribute to the ob-	1.2 How will your proposal contribute to the objectives and the goals of the Department with regards to:									
Economic development										
Creation of sustainable jobs										
The empowerment of previously disadvantaged	groups									
Value addition and beneficiation										
SECTION F: BENEFICIARY										
1.1 Who are the targeted stakeholders/benefic	ciaries/audi	ences fo	or this pro	oposal/b	usiness?					
1.2 Will the proposal/business achieve the foll	owing and	if yes ho	ow?							
1.2.1 Improve the quality of life of the target ben		n terms	of access	s to emp	oloyment? F	Please fill in the t	able below			
to indicate how many jobs your business v			Gender		Youth	People with	Military			
	Total	Male	Female	Other	(Age 35 & below)	Disabilities	Veterans			
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?										

1.2.2 Will your business result in training, mentorship or skills development for any beneficiaries? Please explain											
SECTION G: METHODOLOGY											
1.1 Provide detailed information on the phases, and provide a schedule for emust cover all aspects pertaining to attach you own table where required	each pl	nase.	The	Busi	ness/E	Busin	ess Pla	an r	nust be attached to	this application ar	nd
	Desc	riptio	n of	Wor	k				Start and End Da	tes	
Phase One						J		4			
Phase Two						_					
Thase two											
Phase Three											
		-						4			
Alternatively a Gantt chart may be utilized	d for a	more	detai	led b	usine	ss/ini	tiative	time	etable		
1.2 What will be the duration of the propo	sal?										
SECTION H: FINANCING											
1.1 Please provide information with regar past 3 years (public sector and privat amounts anticipated (please indicate	e secto	or) and	d am	ount	s cont	ribute					Э
Name of funder				Am	ount					ed/ Pending where applicable)	
	R								Approved	Pending	
	R								Approved	Pending	
	R								Approved	Pending	
	R								Approved	Pending	
	R								Approved	Pending	
	R								Approved	Pending	

1.2	1.2 What is the amount requested from the Department of Economic Development, Tourism and Environmental Affairs?																															
	Т	ota	l Co	ost	of E	Busi	ines	ss		(trib	our oute Sou	d b	y C	e Othe	r	R	F equ			g An Fror			EΑ	%		EDT nding		% Own Contribution		
R										R								R											%			%
R										R								R											%			%
R										R								R											%			%
R										R								R											%			%
1.3																			nent secu			of th	nat t	the	fun	ds ł	nave	bee	n se	cure	d, and	t
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1.1	ha	eas ive	e ir liste	naic ed ii	ate n se	wna ctio	n G	ood: an	s or d co	ser mp	vice lete	s w the	ill n tab	ave le b	to elc	be p ow.	oroc	ure	ea or	ı yo	ur b	ousir	iess	s. C	ons	iae	r tne	maı	n ac	tivitie	es tha	t you
#				A	ctivi	ty								lten	ns					(Qua	antit	у				Es	tima	ted '	Valu	е	
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2																								ı	₹							
3																								ı	₹							
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9																								١	₹							
10																								l	₹							
1.2	: Pr	ovio	de i	ทรเ	ırar	nce	pol	icy	(ies) to	be	aco	quir	ed i	in I	resp	ect	of	the	abo	ove	?										

SECTION J: MOTIVATION
Why you deserve to be a beneficiary of the Operation Vula Fund? Why do you need this funding?
· ·

SE	CHON K: RISK MANAGEMENT	
	these risks.	ssful implementation of your initiative and indicate how you will manage
#	Risks	How the impact of this risk will be managed
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
SE	ECTION L: SUSTAINABILTY	
1.1	Is it expected that this proposal will be a cont	tinuous or regular business going forward? If yes provide details.
1.2	2 How will the business expansion be fund	led?

SECTION M: PARTNERSHIP STATEMENT

Important: This declaration must be provided by each partner, including the applicant.

A partnership is a relationship of substance between two or more organisations involving shared responsibilities in undertaking the initiative funded by the Department of Economic Development, Tourism and Environmental Affairs. To ensure that the action runs smoothly, the Department requires all partners (including the lead applicant that signs the contract) to acknowledge this by agreeing to the principles of good partnership practice as defined in the published quidelines.

guidelines.	
	STATEMENT OF PARTNERSHIP
	ents of the proposal submitted to the Department of Economic Development, Tourism take to comply with the principles of good partnership practice.
Name:	
Organisation:	
Position:	
Authorised Signature:	
Date and place:	

Important: This application form must be accompanied by a **signed and dated** partnership statement from the **main applicant** and from **every partner**, in accordance with the model provided.

SECTION N: SUPPORTING DOCUMENTS REQUIRED

THE NECESSARY INFORMATION OR PROVIDE AN ADEQUATE EXPLANATION MAY RESULT IN YOUR APPLICATION NOT BEING CONSIDERED FOR FUNDING. COMPULSORY DOCUMENTS FOR COMPLIANCE 1. The Application Form has been completed and signed 2. A comprehensive Business Plan or Business Plan for the initiative 3. Two (2) year financial statements (income statement, cash flow statement and balance sheet) for the applicant where applicable 4. Two (2) year budgeted financial statements (income statement, cash flow statement and balance sheet) for the applicant where applicable 5. Curriculum vitae of all the key personnel involved in business or initiative 6. Statement of partnership (if applicable) 7. Unemployment Insurance Fund (UIF) Certification (if applicable) 8. Copy of Legal supporting documentation for environmental authorisation, development and other approvals, if applicable. Specify the document	If no, please state the reason (s)
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9. Copy of Lease /Title Deed/Rental Payments (if applicable) 10. Applicant's and Partners' valid registration documents 11. Members disclosure /Cooperative constitution/ articles or memorandums of association 12. Shareholder's certificate showing full details of shareholders 13. BEE Certificate /Sworn Affidavit 14. Declaration of Interest form completed and signed (Annexure B) 15. Signed resolution for members (Annexure A) 16. Valid SARS Tax Clearance/Pin 17. Evidence of registered copyright or patents over the initiative/concept (if applicable)	
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applicable)	
18. Quotations for All Items Requested	
19. A signed 'Partnership Agreement' clearly setting out the details of the	
partnership, the contributions from each partner; the nature and size of	
benefits to each partner, the responsibilities of each partner and the	
percentage shareholding that each partner will enjoy in the new event.	
20. Any other documentation that would assist in motivating your application and	
assist the Funding Adjudication Panel in assessing its feasibility and	
sustainability are attached (<i>Please state these below</i>)	
, ,	

SECTION O: DECLARATION BY THE APPLICANT

Please note that this section must be signed by the duly authorised Accounting Officer of the applicant's organisation.

The applicant declares that:

- The information submitted in terms of this form together with its attached annexures is true and correct;
- The information submitted in terms of this form together with its attached annexures is the current information as at date of signature hereof and confirm that incorrect or out-dated information may cause for disqualification of this proposal for consideration, and or possible cancellation of the contract that may be awarded on the basis of this application;
- It undertakes to comply with the principles of good partnership practice as published in the guidelines;
- It is directly responsible for the preparation and management of the action with its partners, and is not acting as an intermediary;
- Funding has not been received from any other sources for the same proposal and activities as those applied for currently under the Operation Vula Fund;
- The owners/directors/trustees/members of applying organisations are not employees of the state.

I, the undersigned, and the person responsible for the proposal in the applicant organisation, certify that the information given in this Declaration is correct.

	· · · · · · · · · · · · · · · · · · ·	
Name:		
Position:		
Authorised Signature:		
Date:		

ANNEXURE A: DIRECTORS/MEMBERS RESOLUTION

WRITTEN RESOLUTIONS OF THE DIRECTORS/ MEMBERS OF THE BUSINESS

	Resolved that				
1					
	of (business name) be and is hereby authorised and empowered to:			ame) be and	
	1.1. Negotiate, settle the to	1. Negotiate, settle the terms of and sign the documents and all other deeds, certificates, notices,			
	documents or powers documents and to finalise	•	by be necessary for the implement of for purposes hereof:	ation of the	
				igned and/or	
	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			,		
			ary for the implementation of the docu	ments	
2.	•				
	Any agreements, deeds of documents signed by an <i>authorised signatory</i> acting under the authority of this resolution, shall conclusively be deemed to be the documents authorised by this resolution.			•	
3.					
other deeds, certificates, notices, documents or powers of attorney which may be necessary for the				•	
implementation of the abovementioned			ehalf of		
		(business name	e), his/her actions in this regard be an	d are hereby	
	ratified.				
Member	r/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:	
Member	r/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:	
Member	r/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:	
	/D:				
Member	r/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:	
Member	r/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:	
Member	r/Director Full Names:	Date and Signature:	Member/Director Signature:	Date and Signature:	
Member	The stor i all Hames.	Date and Oignature.	member/birector digitature.	Date and Oignature.	
Member	r/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 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 respectof 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, ifapplicable, 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
	· ·	

- 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: