



**DEPARTMENT: DEVELOPMENT PLANNING SERVICES**

**BUSINESS UNIT: LOCAL ECONOMIC DEVELOPMENT**

**APPLICATION FORM: 2023/2024 FINANCIAL YEAR**

**SMME & CO-OPERATIVES ENTREPRENEURSHIP SUPPORT PROGRAMME**

NAME OF COMPANY / CO-OPERATIVE:	
WARD IN WHICH COMPANY / CO-OPERATIVE IS BASED:	
REGISTRATION NUMBER AS REGISTERED WITH CIPC	
POSTAL ADDRESS:	
PHYSICAL ADDRESS:	
CONTACT PERSON:	<p>FULL NAMES: _____</p> <p>ID NUMBER: _____</p> <p>CELLPHONE: _____</p> <p>EMAIL ADDRESS: _____</p>
CSD SUPPLIER REGISTRATION NUMBER (IF REGISTERED):	
NEW VENTURE OR EXISTING BUSINESS	
ECONOMIC SECTOR / SUB-SECTOR	
LIST KEY BUSINESS ACTIVITIES (PRODUCTS BEING PRODUCED OR SERVICES OFFERED )	<p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p>



**ESTIMATED SUPPORT AMOUNT REQUIRED: R**

**DECLARATION BY THE APPLICANT:**

I, THE UNDERSIGNED, WHO WARRANTS THAT I AM DULY AUTHORIZED DO SO ON BEHALF OF THE COMPANY / CO-OPERATIVE , CERTIFIES THAT THE INFORMATION SUPPLIED IN TERMS OF THIS DOCUMENT INCLUDING THE ANNEXURES WITH ADDITIONAL INFORMATION, IS CORRECT AND ACCURATE, AND ACKNOWLEDGES THAT:

1. IF THE INFORMATION SUPPLIED IS FOUND TO BE INCORRECT, THEN RAY NKONYENI MUNICIPALITY MAY, IN ADDITION TO ANY REMEDIES IT MAY HAVE:
  - I. DISQUALIFY THIS APPLICATION

SIGNED ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 2023  
AT \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF AUTHORISED REPRESENTATIVE**

\_\_\_\_\_  
FULL NAME IN BLOCK LETTERS

\_\_\_\_\_  
NAME OF COMPANY / SMME / CO-OPERATIVE

**FOR OFFICE USE:**

**DATE SUBMITTED:**

**DATE:** \_\_\_\_\_

**RECEIVED BY:**

**STAMP:**

\_\_\_\_\_

### **Checklist of accompanying documents:**

Kindly provide the following documentation / information to enable consideration of the application.

No.	DOCUMENTS / INFORMATION REQUIRED	TICK IF PROVIDED
1.	Completed application form (this form)	
2.	CK documents / PTY / Co-operative registration documents by CIPC	
3.	Tax Clearance Certificate	
4.	BBBEE Certificate or BBBEE affidavit	
5.	Certified Copy of the Identity Document(s)	
6.	Proof of Residence (Municipal Account or Letter from Ward Councillor )	
7.	Company Profile	
8.	Business Plan with 3 year projections – <b>New venture</b>	
9.	Financials statements or 6-month bank statement - <b>Existing businesses</b>	
10.	Two (2) quotations from traceable suppliers	

Duly completed forms, with attachments must be submitted to Local Economic Development offices during office hours, and applicants must sign upon submission. Applications are to be submitted to LED Officer: SMME & Cooperatives Development, Ms. Nothando Mthethwa or Senior Clerk: LED, Ms. Msa Maphumulo at the LED Offices. The LED Offices are located at 46 Aiken Street, Port Shepstone. Enquiries pertaining to applications must be communicated with: Manager: Local Economic Development, Mr. Philani Khambule, preferably through email, using the provided contact details as follows: [Philani.Khambule@rnm.gov.za](mailto:Philani.Khambule@rnm.gov.za)

### **CLOSING DATE FOR SUBMISSION OF APPLICATIONS:**

**DATE : FRIDAY, 27 OCTOBER 2023**

**TIME : 12H00**

#### **NB:**

- 1. Faxed or emailed applications will neither be accepted nor considered.**
- 2. Successful applicants will be required to enter into funding / support agreements with the municipality prior to concluding the support transaction.**
- 3. Owing to large amounts of applications that are anticipated, correspondence will be limited to short-listed applications only. In light of this, applicants who do not receive correspondence from the municipality in relation to this call after two (02) months of the closing date must treat & regard their applications as having been unsuccessful. Lastly, in the interest of transparency and in accordance with SMME Support Guidelines, all approved applications will be published in the municipal website, municipal facebook page as well as in local print media.**