



# KWAZULU-NATAL PROVINCIAL GOVERNMENT IN PARTNERSHIP WITH DUNLOP SOUTH AFRICA APPLICATION FORM

## BUSINESS DETAILS

Name of Applicant:

Age of Applicant:

Registration Number of Business Entity:

Position/Role in relation to the Applicant:

ID no of individual representing the Business Entity:

E-mail:

Tel:

Fax:

Cell:

Applicants Business Details - address and trading name:

City/Town:

Province:

Country:

Code:

## FUNDING INFORMATION

Requested grant size: To be determined by the project sponsor.

Total Grant Required for the Dunlop Business  
in the Box:

To be determined by the project  
sponsor.

Owner/s Contributions or other funding received or applied to the Business if any:

R \_\_\_\_\_

R \_\_\_\_\_

R \_\_\_\_\_

R \_\_\_\_\_

R \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**OWNERSHIP INFORMATION**

**Shareholders/Beneficiaries**

Name & Surname	Race	ID Number	Shareholding %

**Executives/Directors/Trustees/Members/Partners**

Name & Surname	Race	ID Number	Role in the business

**Why did you choose to be assisted with the Tyre business? Give brief motivation / explanation for reasons to choose this industry (provide a page long motivation separately).**

## PERSONAL INFORMATION COLLECTION NOTICE AND CONSENT FORM

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 tyre 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. You hereby grant permission in terms of POIA for your information to be utilised for the afore mentioned purpose.

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 authorised Responsible Party and or Data Processor is protected by taking appropriate, reasonable technical and organizational measures to prevent loss, damage unauthorised 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.

## DECLARATION

**The Applicant and all entities and or individuals represented in this application expressly agrees and warrants that:**

- 1) **The below mentioned signatory/is are duly authorised on their behalf and has the consent of all entities and or individuals referred to in this application 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.**

\_\_\_\_\_

**FULL NAME**

\_\_\_\_\_

**FOR AND BEHALF OF**

\_\_\_\_\_

**SIGNATURE**

**ID NUMBER:** \_\_\_\_\_

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

The Business Entity and all individuals, directors, shareholders, members, trustees or partners and all parties represented in this application represent and warrant that:

- The information provided in respect of this application is true, accurate and complete.
- 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

**Signature of applicant:**

**Date:**

## ADDITIONAL INFORMATION REQUIRED

*To be submitted with the application form.*

#	<b>Detailed checklist:</b>	<b>Mark with an X if included</b>
1	The above Application Form fully completed	
2	Certified copies of Incorporation/ Registration Documents of the Business Entity	
3	Certified ID copies of Shareholders, Directors, Executives, Trustees or Members of the Business	
4	CVs of Shareholders, Directors, Executives, Trustees or Members of the Business	
5	Certified recent Tax Clearance Certificates or Pin	
6	Site /Operating Space / Location Documentation, i.e. PTO, Title Deed, Lease Agreement or intent, etc.	
7	<b>Business Plan with the following minimum information:</b>	
	(a) Business Description, History, Location, Key Suppliers, etc.	
	(b) Analysis of Market, Customers and Competitors	
	(c) Analysis of production plan and processes	
	(d) Human Resources (Company organogram and CVs of key people)	
	(e) Marketing and Sales Plan	
	(f) Capital Expenditure Plan (Machinery and Equipment and their costs);	