

# SKILLS DEVELOPMENT AND ENTREPRENEURSHIP PROJECT SUPPORTING WOMEN AND YOUTH (SDEP-SWY)

# APPLICATION FORM FOR OCCUPATION OF INDUSTRIAL YARDS DISTRICT: \_\_\_\_\_\_\_

(In which district would you like to have a workshop?)

Project Identification Number

**Type of Project** (Specify whether: Metal fabrication, wood processing, auto mechanics, gemstone processing, agro-processing, ICT and Energy.

#### SPECIFIC INFROAMTION TO THE APPLICANT

The Citizens Economic Empowerment Commission (CEEC) is inviting targeted citizens and companies to apply for industrial workshops being constructed by the Commission, for possible occupation in September 2019 in the following districts:

DISTRICT	SIZE OF WORKSHOPS	LOCATION FROM CENTRAL BUSINESS DISTRICT (CBD)
Chipata	10m x 10m	Chipata Industrial Yard 7km from CBD off Chadiza Road is located
Kasama	10m x 10m	Kasama Industrial Yard 5km from CBD off Kasama-Mbala Road
Mongu	10m x 10m	Mongu Industrial Yard 12km from CBD along Mongu-Lusaka Road
Ndola	10m x 10m	Ndola Industrial Yard 10km from CBD along Ndola-Lusaka Road
Solwezi	10m x 10m	Solwezi Industrial Yard 12km from CBD along Solwezi-Chingoma Road

The workshops will come serviced with ZESCO grid electricity, water reticulation, common user restaurant, common user toilets, garbage collection services and general security services.

Successful applicants will be eligible to business loans from CEEC. The target business for the workshops include metal fabrication, wood processing, agroprocessing, gemstone processing, auto mechanics, ICT and Energy solutions.

1.0 APPLICANT INFORMATION	
1.1 Name of Business or Person Applying	
a. Current business activities, if any	
b. Legal Form of Applicant (e.g. Limited Company, Cooperative, etc.) Attach copy of certificate if registered.	
c. Copy of business registration certificate	Yes No
d. Physical address of Applicant	
e. Contact Number(s) for Applicant	
f. Next of Kin and their physical address and Phone	

1.2 Shareholders of the Business:

No.	Full Names	Nationality	NRC/ Passport No.	% share	Position in the	Challe	ically enged bled)
			(provide copy of ID)	holding	Business	Yes	No
(i	3 Authorized Repr to act on behalf of th ote) ame of Contact Perso	ne Applicant ai	nd respond to a	any quest	tions regarding	g the Cor	ncept
Po	sition in the Busines	S					
Co	ontact Number(s)		Cell:		Telephone	e:	
Er	mail						
1.	4 Previous CEEC F	unding					
al	Applicant or any of i ready a beneficiary on mpowerment Fund?		rs Yes	No			
If	Yes give details:						
	Name of Business	;					
	Type of Registrati	on of Business	5				
1.	5 Financial Data (F	Please provide	Financial data	for your	business).		
	What is the Month	ly Income of t	he business?	ZMV	N		
	What is the Month	ly Expenses of	f the business?	ZMV			
	How much have yo	ou invested in	the business?	ZM	N		

20. MARKET OVERVIEW
2.1 Trends in Demand (describe the market demand for product/service)
2.2 Trends in Supply(describe the supply situation in the market of you
product/service)
3.0 DESCRIPTION OF PROPOSED PROJECT
3.1 Business Operations
How is your business going to compete in terms of the following:
a)What products and/or services will you be selling to your customers?

b)Techr i)	ology/Equipment and cost of production Briefly explain how your business will operate from Production, Processing up-to Marketing
ii)	What kind of equipment will be needed for the operations
iii)	What will such types of equipment be used for in the operations
iv)	Where will you secure raw materials from and how?
v)	What will be your cost of production per month
d)	Price of products and income:
i)What v	will be the price of your products/services
ii) What	will be your income per month from the business operations

e) Sales Volumes				
i) What will be your level of production per month or year				
1) What will be your level of production per month of year				
ii) Who will be your major competitors in terms of supplying the same				
products/services and why do you think you will survive the competition				
3.3 Proposed Management Team				

	Proposed Management rea				
			relevant experience of key members		
of the management team that will implement and run the proposed business. StartUp					
busir	nesses may only include posit	tions]			
No.	Full Name	Management	Management Qualification and		
		Position	Experience		

	<b>3.4 What will be the Business Impact?</b> In not more than a sentence on each, please indicate the positive impact this business will have on the following:						
	How will your customers benefit from your business?						
b)	How will your suppliers benefit from your business?						
c)	Number of		Women	Men	Total	Youth	Physically Challenged (Disabled)
C)	Workers:	Before CEEC Funding After					
		CEEC Funding					

4.0	4.0 PROJECT BUDGET					
No.	Item	Quantity	Cost (ZMW)	Total (ZMW)		
1						
2						
3						
4						
5						
6						
7						
	Total Budget					

4.1	4.1 CLIENT CONTRIBUTION						
Will	any of the above items be financed by	the Busines	s? If so, list belo	W.			
No.	Item	Cost (ZMW)	Total (ZMW)				
1							
2							
3							
4							

#### 4.2 The Loan

Please note that if your loan amount is more than **ZMW 50, 000** you will need to provide collateral. For group businesses such as Cooperatives or Associations, please note that loans going directly to individual members and those going to the group business should be separately itemized and members requiring loans of amounts less than **ZMW 50, 000** will not require collateral.

# If your application falls in the category where collateral is **Estimated Value of Collateral (in K)** required, please list collateral (e.g. house, farm, etc) 4.3 Project Implementation If you are funded, when would Within 1-2 months □ Within 3-4 months Within 5-6 months More than 6 months operations start? Signature \_\_\_\_\_ Date \_\_\_\_ FOR CEEC USE ONLY Physically Men Target Youth Women Challenged Group **Review Date Stamps:** Signature **CHAIRPERSON** Signature HEAD **DISTRICT QUARTERS EVALUATION CHAIRPERSON COMMITTEE EVALUATION COMMITTEE**