

#### Freedom of Information:

The County & City Enterprise Boards Ltd. are subject to the Freedom of Information Acts 1997 and 2003. Under normal circumstances information supplied on grant application forms or in support of grant applications, is likely to be considered as commercially sensitive information and would not be disclosed to third parties. The County & City Enterprise Boards Ltd. will, in all cases where a request under the Freedom of Information Acts is made, consult with applicants before making a decision on disclosure of such information.





All questions marked with an asterisk ( \* ) are mandatory

1. Contact Details		
Prefix (Mr., Mrs. Etc.)*	First Name*	Last Name*
PPS No.*		
Address*		
Telephone*	Mobile*	Email *:
If the applicant details are the		contact details please tick the box:
Applicant Contact Details (if	_	Contact Details)
Prefix (Mr., Mrs. Etc.)*	First Name*	Last Name*
PPS No.*		
Address*		
Telephone*	Mobile*	Email *:
2. Applicant Details		
(Please Tick)		
Business Name*		
Stage of Business*	Pre-Star <i>t</i> Up	Start Up Growth
(Please tick box)		( <18 mths) ( >18 mths)
Website		
Date Trading Commenced*		
Applicant Type*		
(Please Tick)		
Sole Trader / Individual		
Company		CRO.no
Partnership		
Community Group		
Cooperative		

3. Previous Status of Promoter*					
(Please tick)					
Self Employed	Employed	Un-Employed	Training/Education		
4. Promoters Background	d/Qualifications & Experien	ce			
Include details of all relevant	experience and qualifications	of each of the promoters invo	olved in the project.		
Please add CV's as attachme	ents to this document				

#### 5. Project Sector Details

What type of business are you involved in/hope to be involved in?\*

(Please see page 14 for qualifying businesses in each sector)

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Business Services  Clothing & Fashion  Communications, Media & Entertainment Services  Consumer Services  Craft
Communications, Media & Entertainment Services  Consumer Services
Consumer Services
Craft
Electronics
Engineering
Environment/Green Technologies
Food Manufacturing & Processing
Food Primary Sectors
Furniture/Light Consumer Goods Manufacture
Manufacturing Other
Medical Devices Manufacture
Packaging Manufacturing
Software/IT
Please Describe Your Business / Proposed Business*

6. Details of Proposal/Scope of Study	6. Details of Proposal/Scope of Study				
Background to proposal/purpose of the study (including	Background to proposal/purpose of the study (including description of the product or service to be developed):				
7 Dranged Draggemen of Wark and Timescale					
7. Proposed Programme of Work and Timescale					
Give details of the proposed programme of work to be u	ndertaken and a timescale for t	his work:			
O Fatimated Joh Patantial It Faccible* (Including	the emplicants)				
8. Estimated Job Potential If Feasible* (Including	те аррисантѕ)				
	Curi	ront			
	Curi	ent			
	Full-time	Part-Time			
Male					
Female					
Total					
	Potential	Year 1			
	Full-time	Part-Time			
Total					

9. Critical Factors
(What, at this stage, are critical factors which you believe need to be addressed e.g. technology; licensing; market; finance; quality standards; skills; intellectual property; branding; prototype development/design etc.)
10. By Whom Will The Work Be Carried Out?
(Indicate relevant qualifications and experience) Provide fee proposals from providers setting out scope of work to be undertaken and methodology.
11. Marketing
Markets to be researched, if any:

12. Information Gathered to Date	
Outline what knowledge you have at this stage in market strategy:	relation to market size, growth, other trends, competitors, and
13. Investment Costs*	
Grant Details	
Estimated Expenditure	
Own Labour Research	
Consultancy Fees	
Prototype Costs/ Innovation Costs	
Misscellanous Costs	
Total	
How do your propose to fund the study*	
Investment in project from own resources	
Investment in project financed from borrowings	
Amount of Grant Assistance Sought (max. 50% S&E-60%BMW)	
Other	
Total Investment in project	

14.	Other Relevant Information
a)	Provide justification for assistance that may assist your application such as economic benefits in terms of R&D, jobs, import displacements, value added, exports etc.
b)	Cost incurred to date, if any:
c)	Have you discussed this proposal with any other agency? If yes give details, including response form agency.

d)	Set or	ut any other re	elevant information	or comments you	wish to make	relating to the proje	ct:
1-	<u> </u>						
_15. _	Grant	History*					
a)	Will th	nis project pro	ceed without grant	assistance			
	YES			NO			
I- \	11 0				1 - 1 1h C	)	II
b)	Has th	ne dusiness o	r any of its promote	ers been in receipt	t or any other S	State Supports or E.	U. supports?
	YES			NO			

If YES above please give details including the date, amount and the purpose of the grant c)

Other Grants Provider	Date	Amount	Purpose

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16.	Additio	onal Information			
a)		ou in receipt of, or you will be an applicant yee <b>c</b> employment?* ( <i>please tick</i> )	t for, any	Social Welfare Support in respect of your own or your	
	YES		NO		
b)		pplication may have to be referred to othe ssing procedure. Do you consent to this?*		ies (on a confidential basis) as part of the Boards tick)	
	YES		NO		
c)	Do you	u agree to receive County Enterprise Boa	ırd produ	icts and information? (please tick)	
	YES		NO		
d)	require			k) (Tax clearance certificates and C2 Certification is approved. For Payments in excess of "6,350 a tax	
	YES		NO		
e)	Do you	u propose making an application for seed	capital?		
	YES		NO		
f)	Do you	u propose making an application for BES	funding'	?	
	YES		NO		
Beneficiaries of grant aid should note that the acceptance of funding is an acceptance of their inclusion in the list of beneficiaries under Article 7(2) of the Implementation Regulation (EC) No 1828/2006. This list can be accessed on Border Midland & Western and Southern & Eastern Regional Assembly websites.					
Othe	r Supp	orting Information			
Pleas	e attac	h the following as appropriate (tick items	attached	):	
i) ii) iii) iv) v) vi)	Quota Certific Certific Photog	ulum Vitae tions cate of Incorporation or company registra ed Accounts (in case of existing business graphs (if appropriate) (please specify)		(company only)	

17. Signature				
I hereby declare that the details given in this application, together with any supplementary information supplied are true and accurate				
SIGNED	DATE			
SIGNED	DATE			
SIGNED	DATE			

#### PLEASE NOTE:

Application form and supporting information to be signed and returned to the Enterprise Board. Contact details can be found at the end of this application form.

### Appendix 1

#### **Application Check List**

Application Form Completed	
Application Signed and Dated	
Additional Information	
Your Own Technical/Administrative Qualifications (C.V.)	
Quotations	
Certified Accounts (in case of existing businesses)	
Confirmation of Grant Aid sought from other Agencies	
Certificate of Incorporation (Companies Only)	

REMEMBER INSUFFICIENT INFORMATION WILL RESULT IN DELAYS

### Appendix 2

#### **Sector Definitions**

Business Services	Services provided to other businesses
Clothing & Fashion	Design and manufacture of clothing/Fashion
Communications, Media & Entertainment Services	Digital Media, Wireless Communications, Broadband, Animation, E-Learning, Media & Entertainment.
Consumer Services	Services provided to other consumers/general public
Craft	Manufacture Craft products
Electronics	Manufacture of components/sub supply
Engineering	Manufacture Aerospace, Agricultural Machinery, Automotive, Tanks & Vessels, Tool Making & Plastics
Environment/Green Technologies	Manufacturing & Delivery of Environmental/services/ products and green technologies
Food Manufacturing & Processing	Manufacture and processing of Food
Food Primary Sectors	Primary production of Food
Furniture/ light Consumer Goods Manufacture	Manufacture of light consumer products.
Medical Devices Manufacture	Manufacture of medical devices
Manufacturing Other	Other manufacture not classified above
Packaging Manufacturing	Packaging Manufacture
Software/ IT	Development & delivery of software & IT services. E-Commerce

#### **Contact Details:**

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