

# Winnie Madikizela-Mandela Local Municipality

Physical Address  
51 Winnie Madikizela  
Mandela Street  
Postal Address  
P O Box 12  
Bizana



Office of the Municipal  
Manager  
Tel: 039 251 0230  
Fax: 039 251 0917  
lmahlaka@mbizana.gov.za

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## **Application form 2024/25 Planting Season**

# **FARMERS DEVELOPMENT PROGRAMME**

NB: Deadline for receipt of applications is 16<sup>th</sup> August 2024 at 12H00.

\_\_\_\_\_  
(Company/ Project Name)

\_\_\_\_\_  
Village

\_\_\_\_\_  
Ward

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Alternative Contact Number

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with equal opportunity for all.*

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**1. Company Details:**

No.	Name of Company	
1.	Type of business entity (Coop, CC, (PTY) Ltd etc.)	
2.	How long has the company been in operation?	
3.	Type of business entity (Poultry, Piggery, Vegetable Production etc.)	
4.	Land Size (Hectorage)	
5.	Company registration number	
6.	Tax Clearance number	
7.	Contact number (01)	
8.	Contact number (02)	
9.	Does the company currently have a loan or grant with any other financial institution?	
10.	If yes to point no. 8. How much is the loan? And what is the agreement in terms of repayment?	
10.	Estimated funding required by entity?	
11.	Postal Address of entity?	
12.	Physical address of entity?	

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**2. Declaration of Previous Funding Received from other institutions**

Type of Support	Institution	Year	Contact Person	Contact Number

**3. Overview of the organization.**

Brief overview of the applicants: Vision, Mission, objectives and organizational structure.

Applicant can also attach overview of the organization (No.3)

**4. Balance sheet of enterprise/Project:**

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Assets	Specify	Estimated value
Fixed property (Structure, Borehole, Orchard etc.)		
Equipment		
Motor vehicle/ tractor		
Other(specify)		
Total		R

5. State how the requested funds will be used and estimate value of each item

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6. Trainings completed (Capacity building)

Institution	Type of training	Year	Contact Person	Contact Number

7. Company associates/ partners

Associate/ partner	Role and contribution	Contact person	Contact Number

8. Assumptions and Risks (provide your assessment of risks that can compromise the company's success, as well as your strategy for mitigation of the impact of such risks. )

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9. Provide a motivation on prospects for the sustainability of the company/project beyond funding by the Municipality. Indicate how the project will be financially sustainable.

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**10. DECLARATION**

I THE UNDERSIGNED (NAME) \_\_\_\_\_  
 CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS  
 CORRECT. I ACCEPT THAT THE MUNICIPALITY MAY ACT AGAINST ME AND THE  
 ORGANIZATION I REPRESENT SHOULD THIS DECLARATION PROVE TO BE FALSE.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Position

\_\_\_\_\_  
 Date

**11. Support document checklist (Please mark X)**

Completed application form with declaration	
Registration certificate/CK	
Business Plan	
Valid original tax clearance	
Certified ID Copies of all members	
Proof of land ownership, lease agreement or rental agreement	
Three months company bank statement/Book keeping records	

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Letter from ward councillor confirming existence of company/project.	
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**Submission of all required information does not guarantee approval of the fund or assistance applied for. A decision made by Winnie Madikizela-Mandela Local Municipality will be binding with no obligation to enter any subsequent correspondence. It remains the responsibility of the applicant organization to submit the application on time at the Municipalities LED Offices (Closing date 16<sup>th</sup> Aug 2024 at 12H00). No late applications will be accepted.**

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