

# Reference No: 15/4/4/2 EXPORT MARKETING AND INVESTMENT ASSISTANCE

# & OUTWARD INVESTMENT & OUTWARD SELLING TRADE MISSIONS

# APPLICATION FORM FOR QUALIFYING SERVICES ENTITIES

All correspondence to EMIA should be sent to one of the following addresses:

PHYSICAL ADDRESS (Hand/Courier Deliveries)

EMIA: Division
Building A: Ground Floor
77 Meintjies Street
Sunnyside Pretoria
0002

POSTAL ADDRESS (Registered Mail)

EMIA: Division
Building A: Ground Floor
Private Bag X84
Pretoria
0001

Correspondence that has not been properly addressed to **the dti** can be incorrectly forwarded to other departments. **the dti** does not accept responsibility for mail that has not been properly

addressed

## Effective 1 April 2016

### Warning:

Under no circumstances should any application form and/or the claim form be altered. Amended application/claim forms will not be considered for evaluation.

### Reference No: 15/4/4/2 GROUP OUTWARD MISSIONS: APPLICATION FORM FOR QUALIFYING SERVICES ENTITIES

### **Important Notice to EMIA Customers**

This application form must be submitted together with the following documents:

- (a) A valid, original Tax Clearance Certificate when EMIA is required to make upfront payments
- (b) Copies of the certificate of Incorporation as well as of all name changes effected. In the case of a sole proprietor, please submit a certified copy of a South African identity document.
- (c) A copy of a valid passport for the proposed traveller.
- (d) Company profile or colour / corporate brochure or CD ROM of the services to be marketed by the company. (Faxed copies will not be accepted.)

(e) Latest audited Financial Statements. Please consult the Guidelines for specific requirements.								
			Section A - Pa	articulars of Mission Parti	cipants			
Name of the Compa	ny							
Entity type (Please C	Cross X Appl	icable)						
(Pty) Ltd	Close Corp.	Sole Prop.	Partnership	Limited	Division	0	ther: Please specify	
Phyiscal Address								
City								
Province								
Postal Code								
Telephone number								
Facsimile								
Mobile Number								
Web site address								
Email address								
Contact Person					Designation:			
CEO/MD/Owner					•			
Purpose of participa	tion		Exports		Inves	tment		
Application for: (Name of Mission and dates)								_
Proposed Traveller								

	Reference No: 15/4/4/2 Section B- T	ype of Activity	of Applicant		
Number of Employees		Turnover last fi	nancial year		
Total assets (Excluding fixed property)		Value of fixed p	oroperty		
	Electro-Technical	YES	NO		
	Business Process Outsourcing	YES	NO		
Indicate nature of business:	Pre-Qualified Tourism	YES	NO		
	Built Environment Professions	YES	NO		
	Other (please specify)				
	Please indicate the percentage (%)	of ownership in	your entity		
Black Owned Entity	%	Black Woman	Owned Entity		%
White Woman Owned Entity	%	Disabled Enity	1		%
Disclose information on related parties wh making financial and operating decisions of 2011.					
Name of related party	Short description of the relationship	р			
	Section C - Service	Capacity			
Give a brief description of the nature of yo	ur business, as well as information on ser	rvices exported of	over the last two	years.	
Please list the number and value of ma	or local/international projects undertaken	over the last two	o years.		
Description	Rand Value		Cour	ntry	Local Content %
	ance: Did you receive any financial ass idual and Group offerings.)YES/NO. If				3 years? (This includes
Event / Mission Name	Date	Сог	untry		ance received i.e. IE, NP,

Reference No: 15/4/4/2 Details of whether previous participation resulted in any exports / investments:						
		Important Information				
<u>Travel Arrangements</u>						
The Department of Trade and Industry	(the dti) has appoint	ted Preferred Service Providers, to t	the EMIA Scheme,	for the provision of Travel		
services. It is the responsibility of the customer to EMIA will only consider claims in respect/(Please refer to the guidelines pertaining)	ct of travelling expen	ses where the dti Preferred Service	e Providers or the	respective airline were utilized.		
Upon return from the event, the original statements), original / certified copies o reimbursement.						
	Preferre	ed Service Provider: Disclaimer				
Please note that EMIA does not accept any liability relating to the non-performance or service delivery of the appointed Preferred Service Providers pertaining to the transport of samples or flight and other travel arrangements.						
	Section E - Decla	aration (To be completed by all app	licants)			
	AUTHOR	ISED OFFICIAL OF THE ENTITY				
I,						
In my capacity as						
of						
am aware of the fact that the informatio therefore, subsequently transpires that The Department of Trade and Industry amounts already paid or to withhold furn no later than six months after my return assistance under the EMIA scheme.)	any information in the shall be entitled to wi ther payments due. I I. <b>(Failure to submit</b>	e application and addenda was inco ithdraw or amend its approval and v further undertake to furnish follow-u	orrect, or that certa vithout prejudice to up reports on the s	in information was omitted, its rights, recover any uccesses achieved by the visit		
This application (with any addenda), if s Cessions of the incentives granted are thereof invalidate the contract from the Government Agency.	not allowed unless c	onsented to in writing by the dti . A	ny cessions of the	se EMIA incentives or part		
The organiser / participants indemn asserted by third parties) directly or inc	lirectly related to this		ceting and Investm			
Signed (Authorised Official of Entity)			Designation			
Name in Print						
Date						

Reference No: 15/4/4/2 Document Checklist (Outward Investment & Selling Missions)					
Kindly ensure that all the required documentation is attached to the application in the following order. Please tick in the last column the documentation submitted.	Refer to Mission Guidelines for details				
<ul> <li>(a) A detailed motivation and market research information for the mission to be submitted by the Mission Organiser. Please refer to the Mission Motivation Template for details to be covered, such as:</li> <li>(1) Brief background and overview</li> <li>(2) Purpose of the mission, including clear, measurable objectives and outcomes</li> <li>(3) Duration of the mission and mission plan</li> <li>(4) How will the mission support the mandate of sustainable SMME support and HDI development</li> </ul>					
(b) A detailed mission plan for each of the participants by <b>the Mission Organiser</b> containing information on the companies targeted. (Note: weekends and public holidays are excluded.)					
(c) A detailed business plan (Only applicable to Outward Investment Missions.)					
(d) A valid current Original Tax Clearance Certificate when EMIA makes upfront payments for logistics					
(e) Copies of the certificate of Incorporation as well as of all name changes effected. In the case of a sole proprietor, please submit a certified copy of a South African identity document.					
(f) A copy of the proposed traveller's passport.					
(g) Comprehensive colour / corporate brochure or CD ROM of the products (or services) manufactured and / or marketed by the company (Faxed copies will not be accepted)					
(h) Latest audited Financial Statements in the case of a company. Please consult the Guidelines for specific requirements.					