

REPUBLIC OF ZAMBIA

ZAMBIA DEVELOPMENT AGENCY

ZAMBIA DEVELOPMENT AGENCY ACT (No: 11 of 2006)

APPLICATION FOR: (Tick One)

CERTIFICATE OF REGISTRATION (USD\$)

MSME CERTIFICATE OF REGISTRATION (ZMW)

The Director General Zambia Development Agency P.O Box 30819 Lusaka. Zambia. Tel: +260-211-220177 Fax: +260-211-225270 E-Mail: info@zda.org.zm Web Site: http://www.zda.org.zm

PART 1

1. PROJECT DETAILS.

(a)	Full Name of Enterprise	
(b)]	Date of Application	
(c)	Project Location Plot No	Street/Road
(d)	Administrative Address	
(e)	Province:	District
(e)	Telephone No:	Fax No:
(f)	E-mail Address:	
(g)	Date of Incorporation/Registration of	the Business Name
(h)	TPIN No	
(i)	VAT Registration Number	
(j)	Country of Permanent residence of In	vestor
(k)	Source of Investment (Country)	
(1)	How did you come to know about the	ZDA Tick 1
	Foreign Embassy in Zambia	Media

Foreign Embassy in Zambia	Media
Foreign Embassy abroad	Investment forum in Zambia
Zambian Embassy abroad	Investment Forum Abroad
Website	ZDA Offices
Government Ministry	Other (Specify)

(m) Alternative Address (Foreign/Local) including Tel/Fax/E-mail:.....

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2. OWNERSHIP STRUCTURE.

2.1 State whether your enterprise is: Mark "X" where applicable.

FORMS OF BUSINESS	TICK
Private Limited Company	
Business Name	
Sole Proprietorship	
Partnership	
Cooperative	
Others (Specify)	

2.2 Particulars of Shareholders/Directors

Name and Full Address	Sex	Nationality	National Identity Number	Equity (%)

If necessary use a separate Sheet and attach with this form

2.3 Key Personnel

S/No	Name	Position	Qualifications
1			
2			
3			
4			
5			

3. OUTLINE OF BUSINESS PLAN.

3.1 Details of the Project

.....

.....

(If more space is required, please attach sheet_at the end)

3.3 Details of the product(s) and/or services(s) to be provided:

.....

3.3 Please indicate the type of project.

New	Expansion	Modernisation		asibility study/busing blease attach.	ess pla	n available?	If
			YES		NO		



4. FACILITIES NEEDED FOR PROJECT IMPLEMENTATION.

What facilities are available/required for the project?

FACILITY	AVAI	AVAILABLE		STATUS			
	YES	NO	Owned	Rented	Leased	Under negotiation	
Land							
Buildings							
Plant & Machinery							
Others (Please specify)*							
Planned start date. *							

*.....

5. MACHINERY AND EQUIPMENT SCHEDULE

(Detailed list may be attached.) If necessary, use separate sheet and attach it with this form.

Description	Source/Country	Value of Machinery	
		ZMW	USD
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
TOTAL			

6. EMPLOYMENT AND TRAINING

6.1 Employment in the first year:

CATEGORY	NUMBER OF EMPLOYEES						
	Z	ZAMBIAN NON-ZAMBIAN					
	Existing	Additional	Existing	Additional			
Management							
Technical							
Operatives							
Others (specify)*							
TOTAL							

*_____



6.2 Type of training and its duration to be offered prior to operation and after start-up and where?

.....

.....

6.3 Assistance Required [For MSMEs ONLY]

Explain the type of Business Development Services (BDS) or other assistance you require to develop your business (Tick)

□ Marketing and Sales

□ Technology development

□ Business/Market Linkages

- □ Accounting & Book-keeping □ Market Research & Transfer
- □ Product Development
- Market Information
- □ Business Formalisation
- □ Business Plan Preparation

- Facilitating Licenses
- Access to Finance
 Customer Management

□ Legal Services

- □ Consultancy (specify)
- Training (specify).....

7. TOTAL PROJECT COST AND FINANCING.

7.1 Project Cost [indicate Value in USD/ZMK]

Description of Investment	Year 1		Y	Year 2		ear 3
	Local	Foreign	Local	Foreign	Local	Foreign
Land						
Site preparation and development						
Structures and civil works						
Plant machinery and equipment						
Housing (Residential)						
Office accommodation						
Other (Please specify)*						
Start up working capital						
TOTAL PROJECT COST						

*_____

7.2 Source(s) of Finance (USD/ZMK)

Source	Year 1		Y	ear 2	Y	Year 3	
	Local	Foreign	Local	Foreign	Local	Foreign	
Equity capital							
Reserves							
Loans							
Suppliers' Credit (Source*)							
Other (specify)*							
TOTAL							
*							

Provide evidence for each source. Any financing gap must be addressed. [Does Not Apply to MSMEs]

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8. TARGET MARKET (LOCAL/FOREIGN) FOR YOUR PRODUCT OR SERVICE.

8.1 Please describe your market strategy and specifically highlight your key assumptions and expertise:

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8.2 Current Market Information (Sales)

No	Main Product(S)	Quantity (per Month) ZMW	Sales (per Month) ZMW	Sales (per year) ZMW
1				
2				
3				
Г	Total (All products):			

8.3 Give a forecast of your sales revenues, for the next three years at least, preferably 5 years.

Year	Value of domestic sales in US/ZMW	Value of export sales in US \$/ZMW
1		
2		
3		
4		
5		

9. TECHNOLOGICAL AND MANAGEMENT AGREEMENTS

Please give brief detail of technology transfer or management agreements [Does Not Apply to MSMEs]

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10. JOINT VENTURE.

- (a) Is your project joint venture collaboration <u>with</u> a local (Zambian) company or foreign Company? If "YES" give details on a separate sheet and attach to this application.
- (b) Are you interested in running a Joint Venture (JV) project in Zambia? If YES, please provide adequate details about the type of a Joint Venture arrangement you would prefer

PART III [Does Not Apply to MSMEs]

11. AGRICULTURAL SECTOR.

• Size of area proposed (HA).....

- Location of the project (District).....
- Has your company secured any of the following documents? (Tick)

Document		NO	Pending
(a) Letter from local authorities indicating approval of land			
(b) Lease Agreement (applicable where land is being leased)			
(c) Title Deed (applicable where land is owned)			
If 'YES', please attach document(s)			
If "Pending", please give details			



12. TOURISM SECTOR.

Has your company secured any of the following documents? (Tick)

Document		YES	NO	Pending
	Zambia Tourism Agency			8
	partment of Wildlife and (Where applicable)			
	or signed Lease Agreement (applicable where			
facilities are being leas	ed)			
	1			
If "YES", please attach				
II NO please give cu	rrent status of the application	•••••		
If "Pending", please gi	ve			
details				
	PART IV	•••••		
13 Has your company	y or associate company submitted any previous	annlica	tion in re	spect of this o
any other project?	, or associate company submitted any previous	чррпса		Peer of ting 0
Yes	. No:			
If "YES", please give o	letails:		•••••	
		• • • • • • • • • • • •	•••••	
14. Has any of the sha or any other projects?	reholders submitted any previous application in ?	n respec	t of the s	ame project?
Yes	No			
If "YES", please give of	letails:			
		••••••		
15. Does your comp Certificate?	pany or associate company hold another In	nvestme	nt perm	it, Licence o
Yes	No			
If "VFS " please give	details			
ii ilb , picase give			••••••	
			•••••	
16. Do any of your sl Licence or Certificate	hareholders have interest in other companies t	hat hold	l an Inve	stment Permi
Yes	No			
II "YES", please give c	letails			
			•••••	



17. Applicants are reminded that any person who fraudulently gives false information or conceals any material/information in his/her application risks the revocation of such certificates as provided under the Act. Where any certificate, incentive or other benefit has been granted in consequence of such false statement or concealment, the Investment Board may revoke or cancel any such certificate, incentive or benefit.

18. I (Full Names).....

ofdeclare that the information given is true and correct to the best of my knowledge and belief. I confirm my agreement that the Zambia Development Agency may contact any named reference. I further declare that I have/have not previously submitted any application in respect of the same project.

Signed
Date:
Name:
Designation/Position: