

SEED CAPITAL GRANT SCHEME APPLICATION FORM

YEAR 2024

COMPULSORY CHECKLIST

The following documents should be submitted with this application form, where applicable:

- A copy of the National Identification Card of all applicant(s)/business Owner(s)/promoter;
- A copy of the Business' or Company Registration Certificate from the office of the Registrar General **[Do not tick if not applicable]** *Start-up businesses will be required to submit the Business Registration Certificate after receiving a grant approval in writing from Enterprise Seychelles Agency;*
- A copy of the Business' Tax Identification Number (TIN) registration letter from the Seychelles Revenue Commission (SRC) (if business is already established) **[Do not tick if not applicable]**;
- Where the business is licensable, a copy of the business' license from the relevant licensing authority; **[Do not tick if not applicable]**
- Bank Account details relating to the applicant(s) business;
- Certified quotation(s) or proforma(s) or documents, relating to the grant request; **[Do not tick if not applicable]**
- A letter from the Bank when your grant request relates to personal contribution towards a bank loan; **[Do not tick if not applicable]**
- Where the business is already established, the applicant(s) must provide the turnover of the business for the last 3 years (tax return document); **[Do not tick if not applicable]**
- Where the applicant is making purchase through an e-commerce platform, provide the detail of the item(s) to be purchased and the details of the e-commerce platform; **[Do not tick if not applicable]**
- Rental / Lease agreement if the person is paying rent; **[Do not tick if not applicable]**

IMPORTANT NOTES TO APPLICANTS

1.0 As access to finance remains a major hurdle in doing business in the country, especially for start-up businesses, the Government has revised the previous Seed Capital Grant Scheme (SCGS), which will provide seed capital of up to **SCR 200,000** to fund start-ups and other existing businesses bringing about diversification in the identified priority sectors. The scheme aims to further enhance the development of more competitive and resilient businesses, through the provision of seed funding to ease the access to credit;

2.0 For the purpose of this Scheme:

- **“Start-up Business”** means a business that is not older than 36 months from the date of its registration with the Registration Division at the time of submitting the application, and meet the definition of Micro enterprise.
- **“Micro Enterprise”** means an enterprise which has an annual sales turnover not more than SCR 2 million Seychelles Rupees;
- **“Eligible Businesses”** means businesses satisfying the Scheme’s requirements and criteria as further provided for in Section 2.2 of the Seed Capital Grant Scheme Policy;
- **“Economic Diversification”** means to satisfy the definition of Innovation and/or Value Addition.
- **“Innovation”** means a new or improved product, service or process (or a combination thereof) from;
 - a) the entity’s previous products, services or processes; or
 - b) other products, services or processes on the local market (originality);
- **“Value Addition”** means;
 - a) the transformation of raw materials to a product; and/or
 - b) the enhancement made to a product or service before offering it to consumers;
- **“Priority Sectors”** are the main sectors determined by the Government. The list of Priority Sectors are Tourism, Fisheries, Agriculture, Value-Added and Manufacturing, Blue Economy, Financial Services, Renewable Energy, Education, and Information and Communication Technology.

ELIGIBILITY

1. Business should not be owned in part or in full by Non-Seychellois (**Business should be Seychellois owned**);
2. Business proposals should be in line the **Priority Sectors** as provided under **Section 2.0** above;
3. Start-up Business should **NOT** be older than 36 months from the date of registration with the Registration Division, at the time of submitting the application, and it should meet the definition of **Micro Enterprise** as provided under **Section 2.0** above;
4. In the case of an already established business, the business should have a total annual turnover that does **NOT** exceed **SCR 2 Million**, as per the definition of **Micro Enterprise** above.
5. The applicants must **NOT** have received any similar funding for the proposed business idea under this scheme and/or from another Government organisation. Applicants shall be required to affirm that they have not benefitted under other grant scheme(s) before they can benefit under this one.
6. The following businesses will **NOT BE ELIGIBLE** for the Seed Capital Grant Scheme if it falls under the following list of activities:
 - Retail and/or Wholesale;
 - Importer;
 - Car Hiring;
 - Tobacco and Alcohol Production;
 - Cleaning Services;

- Food Vans;
- Dealing in Shares, Securities and/or other Financial Instruments;
- Dealing in Goods other than in the Normal Course of Business;
- Carrying on Banking, Insurance or any other Similar Activities;
- Providing Legal, Accounting or other Professional Services;
- Activities Relating to the Development and Leasing of Immovable Property;
- Receiving Royalties or License Fees;
- Developing, operating and/or managing Hotels, Hostels, Guest Houses or Residential Care Homes;
- The Holding of Shares, whether Directly or Indirectly, in any Company which carries out any of the Aforementioned Activities

7. The funding from the Seed Capital Grant Scheme is mainly to support the beneficiary to raise additional funds, acquire technology and equipment and other relevant assets for the starting up or expansion of an eligible business, and the scheme will cater for qualifying expenses such as the following;

- Purchase of equipment and materials;
- Marketing and advertising related costs of the business, so that it may improve access to the market;
- Packaging and labelling which would further enhance the appeal and quality of the end product/service;
- Research and development;
- Personal contribution for bank loan, where higher capital is required;
- Intellectual Property Related expenses
- Rent/lease, which the business may incur if it is to find a workspace (for the initial three (3) months from the start of the operation of the business);
- Training

8. The Seed Capital Grant Scheme will **NOT** fund the following expenses;

- Refinancing of existing loans;
- Payment of Arrears;
- Refunding of previous expenses relating to the business for which the grant is being applied for;
- Payment of airfares;
- Acquisition of bonds;
- Purchase of vehicle;
- Payment for construction or extension;
- Any other payments or funding which the Evaluation Committee deems irrelevant to the business.

Note to applicants

- All details in the application form must be clearly explained and substantiated as applicable.
- The application form can be hand-written or filled out electronically.
- Incomplete forms or form with missing documents shall not be accepted.
- Modified forms shall not be accepted. We expect the applicants to use the format provided to fill in the details. Please fill your details in the spaces provided in the application form.
- Applications can only be submitted at ESA Offices, in the manner directed by ESA in its call for proposal.
- Further information, as well as information and guidance on the filling in of this application form may be obtained by contacting the Enterprise Seychelles Agency (ESA) on the telephone number **4289050**

1. SUMMARY

i. Are you a Seychellois Citizen?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
N.I.N: _____	
ii. Is your Business Micro or a Start-Up?	
<input type="checkbox"/> Micro	<input type="checkbox"/> Start-Up
If Micro Business, what is your turnover for the last three years? SCR _____ <input type="checkbox"/> Tax Return Attached	
iii. Business Sector [Tick the appropriate sector related to your business]	
<input type="checkbox"/> Tourism Diversification	<input type="checkbox"/> Fisheries
<input type="checkbox"/> Financial Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Blue Economy	<input type="checkbox"/> Value Addition & Sustainable Manufacturing
<input type="checkbox"/> Renewable Energy	<input type="checkbox"/> Information & Communication Technology
<input type="checkbox"/> Others (Please Specify):	<input type="checkbox"/> Education

iv. Grant Amount being Requested	
SCR _____	
v. Purpose of Funds Requested [Please tick all appropriate fields]	
<input type="checkbox"/> Purchased of Equipment/Materials	<input type="checkbox"/> Research & Development
<input type="checkbox"/> Payment of Rent/Lease	<input type="checkbox"/> Personal Contribution for Bank Loan
<input type="checkbox"/> Marketing & Advertising	<input type="checkbox"/> Intellectual Property Related expenses
<input type="checkbox"/> Packaging & Labelling	<input type="checkbox"/> Others (Please Specify):

vi. Has your business ever received any financial aid from Government?	
<input type="checkbox"/> Yes,	<input type="checkbox"/> No
If Yes, please specify	
.....	

2. LIABILITIES DECLARATIONS

Enterprise Seychelles Agency
Camion Hall, Victoria
Mahe, Seychelles

___/___/___

TO WHOM IT MAY CONCERN

I/We _____ declare
that, I/We do **NOT** have any arrears of payment on lease/rent with any Governmental entities, such as
Enterprise Seychelles Agency, and Industrial Estate Authority.

Applicant 1

Signature _____ Date ___/___/___

Full name in capital letters _____

Applicant 2

Signature _____ Date ___/___/___

Full name in capital letters _____

Applicant 3

Signature _____ Date ___/___/___

Full name in capital letters _____

Enterprise Seychelles Agency
Camion Hall, Victoria
Mahe, Seychelles

___/___/___

TO WHOM IT MAY CONCERN

I/We _____ declare
that, I/We have **NO** outstanding liabilities with the Seychelles Revenue Commission (SRC), and I/We
hereby attached a copy of the Tax Clearance document issued by the SRC.

Applicant 1

Signature _____ Date ___/___/___

Full name in capital letters _____

Applicant 2

Signature _____ Date ___/___/___

Full name in capital letters _____

Applicant 3

Signature _____ Date ___/___/___

Full name in capital letters _____

3. SYPNOSIS

vii. Applicant(s)/Business Owner(s) Details <i>[Refer to the name or names printed on the Business/Company Registration Certificate]</i>		
Name(s)	National Identification Number(s)	Contact(s)
		Tel :
		Email:
		Residential Address:
		Tel :
		Email:
		Residential Address:
		Tel :
		Email:
		Residential Address:
viii. Name of Business <i>[Refer to the business name printed on the Business/Company Registration Certificate]</i>		
ix. Business/Company Registration Number (BRN) <i>[Refer to the number printed on the Business/Company Registration Certificate]</i>		

x. Business/Company Registration Date <i>[Refer to the date printed on the Business Registration Certificate]</i>		
___ / ___ / ____		
xi. Legal form of Undertaking <i>[Tick where applicable]</i>		
<input type="checkbox"/> Sole Trader	<input type="checkbox"/> Partnership	<input type="checkbox"/> Company
xii. Taxpayer Identification Number (TIN) <i>[Refer to the letter from the Seychelles Revenue Commission]</i>		
TIN -----		
xiii. Is your Business Licensable		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If Yes, please insert the License Number <i>[Refer to the number printed on your License Document]:</i>		

License Number _____ License Attached [Tick if applicable]

xiv. Business Location

Home address, specify where including Sub- District and District

.....

Mobile Business (Moving from one location to the next)

.....

Rent or Leasing, specify where and attach Rental or Lease documentation

..... Rental/Lease Document Attached

Other, please specify

.....

xv. Business Telephone Number(s) [You may have more than one telephone number].

Telephone Number 1 _____

Telephone Number 2 _____

Telephone Number 3 _____

xvi. Business Bank Account Details

Bank Account Number _____

Bank Account Name

Bank Name

Bank Address

xvii. Business E-mail Address(es) for servicing of documents [You may have more than one email address].

Email Address 1

Email Address 2

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4. BACKGROUND AND DESCRIPTION OF BUSINESS

i. Brief description of your business
ii. Brief description on the customer needs your business will address
iii. Brief summary on where you see your business in:
1 year
1 to 2 years
3 years and beyond

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5. MANAGEMENT AND EMPLOYMENT

i. Briefly describe how your business would be structured (E.g. Number of employees, Post titles, and nature of duties, etc.)

6. MARKETING

i. Details of the target market for your product(s)/service(s) [Tick the appropriate answers which are relevant to your business]				
Types: <input type="checkbox"/> Individuals <input type="checkbox"/> Families <input type="checkbox"/> Businesses <input type="checkbox"/> Others, specify	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> All	Age: <input type="checkbox"/> 0 - 5 yrs <input type="checkbox"/> 6 - 12yrs <input type="checkbox"/> 13 - 17yrs <input type="checkbox"/> 18 - 30yrs <input type="checkbox"/> 31 - 50yrs <input type="checkbox"/> 51yrs + <input type="checkbox"/> All ages	Monthly Income (in SCR): <input type="checkbox"/> 0 - 20,000 <input type="checkbox"/> 21,000 - 50,000 <input type="checkbox"/> 50,000 +	Target regions: <input type="checkbox"/> Local <input type="checkbox"/> Regional <input type="checkbox"/> International <input type="checkbox"/> All
If any Other target market, please specify;				

.....
.....

ii. What research have you conducted to understand your market [Tick the appropriate answers or add other relevant information]

- | | |
|---|---|
| <input type="checkbox"/> Surveys and Questionnaires | <input type="checkbox"/> Interviews |
| <input type="checkbox"/> Desk or Online research | <input type="checkbox"/> Trade Fairs or Exhibitions |
| <input type="checkbox"/> Met with suppliers | <input type="checkbox"/> Social media research |
| <input type="checkbox"/> Family and Friend | <input type="checkbox"/> Others |
| <input type="checkbox"/> None | |

iii. Briefly explain why you have chosen the above target market

iv. What marketing strategies would you use to attract customers to buy your product(s)/service(s)

v. Briefly explain your chosen distribution channels to bring the product/service to the customers

vi. Name two of your top potential competitors

Competitor 1	
Competitor 2	

i. State how you intend to differentiate from your competitors

7. SUSTAINABILITY

i. State how your business will provide benefits to your community and the environment

(ii) Yearly Forecast

Year	0	1	2	3
Income from Sales				
Total Sales				
Expenses				
Salaries for employees				
Bills and Utilities				
Repairs and Maintenance				
Telephones				
Rental of Premises				
Transportation Costs				
Insurance				
Loan Repayment				
Total Operating Costs				
Net Profit				

9. SUPPLIER'S DETAILS

Supplier Name(s)	Product(s)/Service(s) being provided by Supplier	Relationship agreement	Invoice No.(No less than 6 months old)	Invoice Amount in SCR
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		

		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		

		<input type="checkbox"/> Contract <input type="checkbox"/> Buy on Demand <input type="checkbox"/> Other, please specify		
TOTAL				

10. DECLARATION

I/We, hereby declare that:

- i. All information provided in this application as well as the accompanying information are true and accurate and reflect the status of affairs as at the date of submission. I undertake to inform the Enterprise Seychelles Agency (ESA) immediately if there are any subsequent changes to the above information (in particular, subsequent approval of funds by other public funding sources after this application is submitted);
- ii. I will indemnify the Government against all losses, liabilities and claims that I may suffer, incur or be subjected to in relation to this application or the project;
- iii. I understand that any false declaration would lead to termination of the funding agreement, refund of any funds given, and the possibility of criminal charges.
- iv. I authorize the Enterprise Seychelles Agency to undertake credit checks as necessary to verify the accuracy of the statements made and to determine my creditworthiness.**

Signature _____ Date _____

Full name in capital letters _____

Signature _____ Date _____

Full name in capital letters _____

Signature _____ Date _____

Full name in capital letters _____