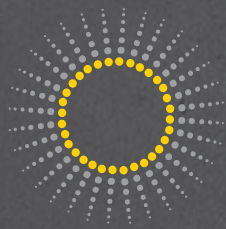

APPLICATION

FORM



IMVABA
CO-OPERATIVE FUND



SECTION 1: DETAILS OF THE CO-OPERATIVE

| | | | | | | | | | | | | |
|--|-------------------------------|--|--|--|----------------|--|-------------------------------|--|--------------------------|--|--|--|
| NAME OF THE CO-OPERATIVE: | | | | | | | | | | | | |
| Registration no. | | | | | Income Tax No. | | | | | | | |
| Physical Address of the co-operative | | | | | | | | | | | | |
| Economic Sector | Agriculture (agro-processing) | | | | | | Manufacturing | | | | | |
| | Tourism | | | | | | Services | | | | | |
| | Retail | | | | | | Other | | | | | |
| Business Activity | | | | | | | | | | | | |
| Number of Founding Members (as registered at CIPC) | | | | | | | Number of potential employees | | | | | |
| Demographic Profile | No. of Males | | | | No. of Females | | | | No. of Youth (18-35 yrs) | | | |
| District Municipality | | | | | | | | | | | | |
| Local Municipality | | | | | | | | | | | | |
| Town and Village | | | | | | | | | | | | |

Details of 2 contact people *(attach certified ID copies of all members plus resumes of BOD)*

| | | | | | | | | | | | |
|-----------------------|--|--|--|--|----------------|--|--|--|--|--|--|
| Name and designation: | | | | | Cell Phone: | | | | | | |
| Telephone: | | | | | Tel: | | | | | | |
| E-mail (if any): | | | | | Fax | | | | | | |
| Physical Address | | | | | Postal Address | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Name and designation: | | | | | Cell Phone: | | | | | | |
| Telephone: | | | | | Tel: | | | | | | |
| E-mail (if any): | | | | | Fax | | | | | | |
| Physical Address | | | | | Postal Address | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

SECTION 2: FUNDING AND PRODUCT INFORMATION

| | |
|---|---|
| Total Funding Required from Imvaba Fund. | R |
| What will the funds be used for? (attach separate page if there is a need). | |
| | |
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| | |
| Describe your products or service. | |
| | |
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| | |
| Where do you buy your stock for your products, name your suppliers (attach quotations). | |
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| | |
| Who are your local competitors? | |
| | |
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| | |
| Does your co-operative use any technology? If so, please explain. | |
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| | |
| List the training needs of your members. | |
| | |
| | |
| | |

SECTION 3: MARKET AND QUALITY INFORMATION

Where do you currently sell your products and what is your future market?

When did you start selling your product?

How much volumes of your product do you sell per month?

Can you sell more and how?

How does the co-operative plan to distribute and/or transport the products?

Explain in detail.

How does the co-operative plan to promote the activities of the business?

SECTION 4: TRAINING NEEDS ANALYSIS

| | | |
|---|--------------------|--|
| What is the highest level of education of your Board Members? | Chairperson | |
| | Deputy Chairperson | |
| | Secretary | |
| | Treasurer | |
| | Other | |
| List training programmes that your membership has attended in the past 2 years. | | |
| | | |
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| | | |
| Does your co-operative hold Annual General Meetings, as per the requirement of the Co-operative Act of 2005? If so, please provide proof. | | |
| | | |
| | | |
| Does the co-operative have a constitution? If so, do all the members understand it and adhere to it? If not, why? | | |
| | | |
| | | |
| Has the co-operative signed any contracts in the past 12 months or has any contracts in place? If so, explain in detail. | | |
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SECTION 5: FINANCIAL INFORMATION

| | |
|--|---|
| What is the financial Year end of the co-operative? | |
| How much money is your co-operative making per annum? (if operating) | R |
| What are the monthly expenses of the co-operative? List all the items together with the costs. | |
| | |
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| | |
| Does the co-operative keep records? If not, why? | |
| | |
| | |
| Does the co-operative submit annual audited statements to the Registrar as per the requirements of the Co-operative Act of 2005? If not, why? | |
| | |
| | |
| What are identifiable risks of your co-operative? List them. | |
| | |
| | |
| | |
| | |
| Has the co-operative received funding from any other sources? If so, please give details of the following: <ul style="list-style-type: none"> • who provided the funds? • how much was given? • what were the funds for? • how were they used and for how long was the funding? | |
| | |
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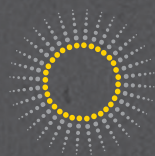
SECTION 6: DECLARATION

We, the members of the co-operative, hereby declare that the information in this application is a fair and true reflection of our intended business. We are aware of the fact that the information which we have submitted above will have a material bearing on the adjudication of the application. If it subsequently appears that any information in the application with addendum was not correct, or that certain information was omitted, the Funding Committee shall be entitled to withdraw or amend its approval and without prejudice to its rights, to recover any amounts already paid or to withhold further payments due.

We have declared that we are authorised to make this application and we have read and accepted the terms and conditions listed in the guidelines.

We authorise you to make any enquiries in accordance with your procedures in connection with this application.

| | |
|--|--|
| Name of authorized member of the co-operative: | |
| Signature | |
| Place (Office and Town) | |
| Date | |



IMVABA
CO-OPERATIVE FUND



**EASTERN CAPE
DEVELOPMENT
CORPORATION**

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HEAD OFFICE

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