



**REGIONAL PRIVATE SECTOR DEVELOPMENT PROGRAMME
(FED/2011/260-647)**

**APPLICATION FORM
FOR THE
DIRECT ASSISTANCE GRANT SCHEME**

Call for Proposal: Number EDF11-19-01

Publication Date: April 29, 2019

Deadline: June 11, 2019 @ 4:30 p.m. (Barbados time)

DEMONSTRATION PURPOSES ONLY

IMPORTANT NOTICE

- I. **Please read and complete the application form, in accordance with the “Guidelines and Procedures for the Direct Assistance Grant Scheme (DAGS)”.**
- II. An applicant may submit one (1) application form for this Call.
- III. Applicants are required to submit **two (2) copies** of their applications in hard copy via registered mail, courier or hand delivery to Caribbean Export Headquarters:

Attn: Manager – Competitiveness and Export Promotion
Caribbean Export Development Agency
1st Floor Baobab Tower
Warrens
St. Michael, BB15154
BARBADOS

The outer envelope must bear **the title of the Call for Proposal Number - EDF11-19-01**

- IV. Applications can ONLY be submitted via HARD COPY. All applications must be received by the specified **deadline date of June 11, 2019 @ 4:30 pm (Barbados time)**. This includes the required supporting documents that must accompany each copy of the application form:

- *Notarised copy of Registration of Certification or copy of Certificate of Incorporation*
- *Copy of the applicant’s (or lead organization) latest financial account statements (income / profit & loss statements and balance sheets) audited or unaudited for the last two financial years.*
- *Financial support documentation such as a line of credit, loan, certificate of deposit, additional bank account statement, etc.*

V. **All applications must be submitted in ENGLISH.**

VI. All applicants MUST complete Caribbean Export’s online SME Diagnostic Assessment found at <https://sme-diagnostics.ceintelligence.com/go?to=DAGS>. The diagnostic assessment is a web-based enterprise level tool which allows for a scientific assessment of regional exporting firms (manufacturers and service providers). The assessment diagnoses and identifies the strengths and weaknesses of SMEs across 4 main pillars – Management, Production, Finance and Marketing. **Applications will NOT be considered completed until the Assessment is FULLY completed.**

If a potential applicant has previously completed the assessment tool, they need not complete a second assessment. They may download and submit the results of their

existing assessment. Applicants wishing to update their existing Assessment or for those who have lost their TAN access number, can submit a written request to dagsinfo@carib-export.com to provide the TAN or to unlock their existing assessment for further updates. This also includes applicants who have completed the Assessment and have no updates but are required to submit copies of the full Results Page.

The full Results Page (TOTAL SCORES - OUT) of the Diagnostic Assessment Tool must be printed and submitted with each copy of the application.

- VII. Applicants must ensure that they use the correct application form for the current Call for Proposal (CfP) provided on Caribbean Export's website. All other variations of the application will be declared null and void.
- VIII. Applicants must ensure that Section 6, entitled "Applicant Declaration", of the Application Form is signed by the applicant and submitted. Application forms which have not been duly signed will not be considered.

Applicants must ensure that the Partner's Agreement is signed, if applicable.
- IX. All information submitted by the applicant will be treated in a confidential manner.
- X. Caribbean Export reserves the right to conduct due diligence on all applications received. This due diligence may be conducted by Caribbean Export and/or a partnering Business Support Organisation in the applicant's country of domicile, to verify the accuracy of their proposal and/or legitimacy of their business. Applications deemed to contain inaccurate/misleading information will be rejected and those applicants will be barred from re-applying to the programme for a period of five (5) years.
- XI. Failure to submit the required supporting documentation will result in the application being rejected.
- XII. Applicants that have an open Grant contract under EDF11-18-01 are **NOT Eligible** to apply. i.e. applicants who have not submitted their final reimbursement claims to Caribbean Export by June 11, 2019, are not eligible to apply.

1**PROFILE OF APPLICANT**

COMPANY DETAILS		
Head of Organisation/Owner	Mr. John Brown	
Gender of Owner(s)	Male(s)	Female(s)
Gender of Senior Management	# of Males	# of Females
Name of Company/Organisation	ABC Company Limited	
Country	Barbados	
Postal Address	One accord Plaza, Warrens, St. Michael	
Physical Address	One accord Plaza, Warrens, St. Michael	
City	Bridgetown	
Telephone Number	246-426-8596	
Fax Number	246-424-8596	
E-mail address	abccoltd@gmail.com	
Website	Abccoltd.com	
Date of Company Registration	1990	
Registration Number	111-200	
Industry/Sector of Activity	Manufacturing	
Number of employees		
Are you a Member of a Business Support Organisation (BSO) in your Country?	YES/NO	Name of BSO:

MAIN CONTACT		
Title	Ms.	
First Name	Jane	
Surname	Brown	
Position	Production Manager	
Telephone Number	246-467-1152	
Cellular/Mobile Number	246-831-4592	
Fax Number	246-467-1153	
E-mail Address	j-brown@abccoltd.com	

BANK DETAILS OF COMPANY/ORGANISATION	
Bank Name	CIBC First Caribbean International Bank
Bank Branch	Warrens
Contact person	Ms. Philisha Hope
Address	Dome Mall, Warrens, St. Michael
City	Bridgetown
Country	Barbados
Account Name	ABC Company Limited
Account No.	123456789
SWIFT code	FCIBBBBB
ABA code	029132893
Currency	BD\$

INTERMEIDARY BANK DETAILS FOR WIRE TRANSFERS	
Intermediary Bank Name	Wells Fargo Bank NA
Address of Intermediary Bank	10733 West Peoria Ave, Washington DC, 20005
SWIFT code of Intermediary Bank	WFBNA14

2**PROJECT/TITLE:**

Total Project Cost	Caribbean Export Contribution Requested	% of Contribution Requested
€42,857.14	€30,000	70%

2.1 Give an overview of your company or organisation (include types of products or services offered, number of employees, export markets, forecasted/future areas for growth for the firm, etc):

- Provide a historical overview of your company
- Highlight the types of services offered
- Highlight the types of goods produced
- Number of employees
- Indicate export markets and projected areas for growth

2.2 Give a detailed description of each activity to be undertaken to complete the project – include the action plan for undertaking project activities:

- Explain and outline the details of each activity to be undertaken
- Explain the types of personnel (e.g staff, consultant) required to undertake activity
- List the problems/challenges/issues that the proposed activities intend to address/solve
- Ensure proposed activities are in line with the project objectives and results
- Proposed activities to be completed in six (6) months (Refer to section 2.5 of Guidelines)
- Proposed activities must be reflected in the detailed budget
- The Action Plan should summarise all activities to be completed, as well as indicate the resources to be used.

Summary Action Plan of Activities mentioned in 2.2 (add fields as required)

Activity	Half-year 1						Persons Responsible
	Month 1	2	3	4	5	6	
Example: Activity 1: Trade shows							Managing Director & Marketing Officer
Example: Activity 2: Equipment Modernization							Manager & Equipment Supplier
Example: Activity 3: Market Research & Food Safety Audit							Consultant
Etc.							
Etc.							

2.3 Give a detailed description of the human resources (i.e. staff or consultant) to be utilised for undertaking project activities, that is, technical expertise, management capacity, experience. Please include the qualification and experience of staff/consultant to be used:

- Provide a detailed description of the management team or personnel years of experience in managing the company's business
- Demonstrate the years of experience and qualifications of the management team or personnel to be involved in the project
- Demonstrate how the existing management structure or personnel have the capacity to complete the proposed activities
- If a consultant is to be recruited or hired, the type of consultant required should be stated as well as the level of experience.

2.4 List the expected results (i.e. quantifiable indicators) that the project aims to achieve:

Objectives/Measurable Results	Quantifiable Indicators
Increase production output by 20%	<ul style="list-style-type: none"> • Number of products produced • Installation and operation of new production equipment
Increase visibility of the company's products	<ul style="list-style-type: none"> • Production of collateral materials such as brochures, advertisement,

	promotional events
Increase in annual sales	<ul style="list-style-type: none"> • X number of products sold for the year
Conduct market research	<ul style="list-style-type: none"> • Market research report
Promote and market products	<ul style="list-style-type: none"> • Participate in international trade shows

2.5 Explain the relevance / importance of the project to the company and the needs and constraints to be addressed, and how the proposed activities are linked to the overall growth strategy of the firm:

- Are the proposed activities in line with the Regional Private Sector Development programmes overall objectives?
- What are the present challenges affecting the company ?
- How will the proposed activities remedy/resolve improve the existing challenges?
- What are the implications for the company if the present challenges are not Addressed ?
- Are there any opportunities to be explored?
- How will the proposed activities realise these opportunities ?
- How will the proposed interventions affect the growth strategy of the company ?

2.6 Indicate any specific value-added elements, in particular, promotion or alliance of public/private partnerships, innovation and best practices, or cross-cutting issues such as climate change, promotion of gender equality and equal opportunities?

The proposed project will be financed from the company's personal funds, confirmed by financial statements and a letter from the financial institution confirming overdraft facility.

2.7 Indicate how the project activities will be financed if approved:

- The proposed activities will be finance through personal funds.
- The proposed activities will be finance through a bank loan.
- The proposed activities will be finance through an approved line of credit.

2.8 Explain how activities will be financed after grant funding ends and the institutional structures that will be implemented at the end of the project:

The completion of the proposed project will result in increased production of goods which would result in increased revenue which will be utilised to facilitate improvement of other areas of the company.

2.9 Describe the company/organisation which will be a partner of the applicant in the project (If Applicable)

Partner 1

Name of Company/Organisation	Gateway Productions
Postal Address	Dark Hole, Swan City, St. Michael
Physical Address	Dark Hole, Swan City, St. Michael
Country	Barbados
Telephone Number	246-424-4899
Fax Number	246-434-4899
E-mail address	gatewayprod@gmail.com
History of cooperation with the applicant	Supplier of specialised equipment and technical training for equipment operators.
Role and involvement in	Provision of technical advice to identify and source

implementing the proposed project/action	production equipment
Contact Person	Mr. Emmerson Snagg
Position	Managing Director
Signature	<i>Emmerson Snagg</i>
Date	June 1, 2019

Partner 2

Name of Company/Organisation	Market Finders Ltd
Postal Address	18 Holy Trinity
Physical Address	18 Holy Trinity
Country	Grenada
Telephone Number	473-468-5124
Fax Number	473-468-5185
E-mail address	markfinltd@gmail.com
History of cooperation with the applicant	
Role and involvement in implementing the proposed project/action	Provide guidance on potential markets for products
Contact Person	Mr. Whitfield Hinds
Position	Chief Executive Officer
Signature	<i>W Hinds</i>
Date	June 1, 2019

3**BUDGET**

Please download and complete the separate excel spread sheet document to itemise your budgetary cost for the proposed project. **Failure to submit the completed budget template will render this application incomplete and will not be considered eligible.**

To be completed at <http://www.carib-export.com/download/181060/>

Applicants must ensure that itemised costs for expenses allocated in the budget are adequate when submitting their application forms. **No Budget reallocations will be allowed when the Grant has been awarded.**

4**DIAGNOSTIC ASSESSMENT**

Please complete the online Diagnostic Assessment Tool, which identifies the strengths and weaknesses of the company and its ability to successfully execute the project proposal. Failure to submit the **completed** Diagnostic Assessment will render this application incomplete and will not be considered eligible.

Please refer to Articles **4.2.2 Evaluation of Application of the Guidelines.**

To be completed at <https://sme-diagnostics.ceintelligence.com/go?to=DAGS>

Applicants wishing to update their existing Assessment or have forgotten their TAN number, should submit their written request to dagsinfo@carib-export.com. This also includes applicants who have completed the Assessment and have no updates but are required to submit copies of the full Results Page.

The full Results Page (TOTAL SCORES - OUT) of the Diagnostic Assessment Tool must be printed and submitted with each copy of the application.

The following documents must be submitted as part of the application process:

1. Notarised¹ copy of Registration of Certification or Notarised copy of Certificate of Incorporation
2. *Copy of the applicant's (or lead organization) latest financial account statements (income / profit & loss statements **and** balance sheets) audited or unaudited for the last two financial years.* In accordance with section 2.1 (i) of the "Guidelines to the Direct Assistance Grant Scheme" the applicant is deemed to be the lead organization in the case of groups.
3. Financial support documentation (i.e. a line of credit, loan, certificate of deposit, etc.) must be submitted with applicant's financial statements to demonstrate their ability to finance the project (if a line of credit or loan is to be taken for the execution of this project then a Bank certification must be submitted stating your pre-approval for the amount of the whole project, or certifying the applicant's open line of credit).

¹ Documents must be notarized by a Notary Public.

We the company hereby apply for a Direct Assistance Grant to meet part of the cost of undertaking activities to improve our competitiveness. We hereby declare that:

- i. We are a private enterprise, registered in a CARIFORUM country and majority owned by private interests;
- ii. The project for which we are applying for a Direct Assistance Grant can be reasonably expected to produce measurable benefits to our company, well in excess of total consulting fees and expenses;
- iii. We are able and agree to pay for the full cost of the project activities prior to receiving the Direct Assistance Grant;
- iv. If recommended to be awarded a grant, we accept the contractual obligations as laid down in the grant contract;
- v. We do not use child labour in the normal production of our goods and services;
- vi. We conform with national health, labour, safety and environmental requirements;
- vii. We agree to provide access to Caribbean Export and/or a partnering Business Support Organisation in the applicant's country of domicile to verify the accuracy of the application and proposal and/or legitimacy of the business. It is understood that if any application is deemed to contain inaccurate/misleading information it will be rejected, and that applicant will not be eligible to re-apply to the programme for a period of five (5) years;
- viii. We will allow Caribbean Export and any European Union-appointed auditor to have access to and sight of all areas and records of our operations relating to the proposed project for a period of up to three years after project completion;
- ix. We accept that Caribbean Export, the European Union and the African Caribbean and Pacific Group of States will bear no responsibility for the project. The information and statements contained in the accompanying Application for a Direct Assistance Grant are true, fair and accurate to the best of our knowledge and it is understood that Caribbean Export may withhold payment of the assistance in the event of misrepresentation of any facts stated in this Application or in any subsequent requests by ourselves for the payment of a Direct Assistance Grant;
- x. We agree to abide by the decisions of Caribbean Export regarding the award or payment of any Direct Assistance Grant requested by ourselves.
- xi. We understand that Caribbean Export shall hold in confidence all information contained in this Application and shall not at any time make any public disclosure regarding our enterprise, our activities or the project under application without our prior written consent. This Application is made with the full knowledge and acceptance of our Directors/Proprietors.

I, **(insert name and title)**, am duly authorised to file and sign this application on behalf of **(insert name of company)**.

Name		
Position		
Signature		Date

Before submitting your application, please check that each of the following components is satisfied and completed.

	To be completed by Applicant
1. Direct Assistance application form Completed.	
2. Applicant Declaration Form signed and dated	
3. Proof of Registration or Incorporation	
4. Copy of the budget downloaded and completed (http://www.carib-export.com/download/181060/)	
5. SME Diagnostic Assessment Tool Completed and results page (TOTAL SCORES OUT) submitted (https://sme-diagnostics.ceintelligence.com/go?to=DAGS)	
6. Copy of the applicant's (or lead organization) latest financial account statements (income / profit & loss statements and balance sheets) audited or unaudited for the last two financial years.	
7. Proof of Financial Availability to implement this project (loan, line of credit, additional bank statements).	
8. Partnership statement signed (if applicable)	
9. The budget is presented in the format requested, and is expressed in EURO (€)	
10. The requested contribution is equal to or greater than 10,000 EURO (the minimum allowed) and equal to or less than 30,000 EURO (the maximum allowed)	
11. The requested contribution is equal to or less than 70 % of the total eligible costs (maximum percentage allowed)	