

Project Application Form

Enterprise information

Details:

Full enterprise name: _____ Registration number: _____

Address: _____

Tel: _____ Fax: _____

Email: _____ Website: _____

Name of Director: _____ Director's official position (if different): _____

Gender of Director: _____ Age of Director: _____

Year of establishment: _____ Annual turnover (EUR): _____

VAT/TAX ID (if applicable): _____

Employees:

Total number of employees: _____ Number of female employees: _____

Industry: _____

Describe your business (its history, products, services, clients, volumes and main developments)

History of enterprise establishment (last 5-10 years):

Year	No. of employees	Annual turnover (EUR)	Significant milestones (privatisation, restructuring, implementation of industry standards, etc)

Advice for Small Businesses in North Macedonia

Structure of ownership (distribution of shares or units in %):

Local % _____

Foreign % _____

Private % _____

Female % _____

Product or services and their share of income:

_____ % _____

_____ % _____

_____ % _____

_____ % _____

Export _____ % _____

Investments (please provide information on credits used by company):

Year	Name of credit institution	Amount (EUR)	Interest rate p.a.	Status (active, repaid, required)

Project description

What are the issues you would like the project to address?

What kind of advice do you require?

What do you expect the project to achieve?

Advice for Small Businesses in North Macedonia

Proposed consultant

(if you have a consultant for the work, please provide the company name, contact details, and the name of the person responsible for the project):

Expected start date: _____

Employee responsible for project from your company:

Name: _____ Title: _____

Address: _____

Tel: _____

Email: _____

Date: _____ Signature: _____

Signed by: _____

How did you learn about us?

- | | |
|---|---|
| <input type="checkbox"/> Website | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Previous client | <input type="checkbox"/> Visibility event |
| <input type="checkbox"/> EBRD Resident Office | <input type="checkbox"/> Our team |
| <input type="checkbox"/> Other (please specify) _____ | |

Has your enterprise used a professional consultant before? If yes, please specify:

Exchange rate used to calculate the EUR values in this form: 1 EUR = _____

Please include the following supporting documents in your application package:

- Project Application Form
- Copy of Registration Certificate
- Certificate of Ownership for majority shares (extract from Charter or Memorandum of Establishment)
- Copy of Annual Financial Statements for the previous TWO years (Income Statement, Cash Flow, Balance Sheet) stamped by company

Disclaimer: If you submit information or data ("Your Submissions") as part of this application, the EBRD will retain a copy of Your Submissions. The EBRD will keep Your Submissions confidential and will not intentionally disclose any of Your Submissions to any third parties unless it is required to do so by any applicable law.