

454 Streatfield Street, Dutywa Eastern Cape Province Tel: 047 489 5800

Email: info@mbhashemun.gov.za

www.mbhashemun.gov.za

MBHASHE LOCAL MUNICIPALITY FUNDING APPLICATION FORM

Section 1- Organisational Details				
Organisatio	n			
Name				
Physical				
Address				
Postal				
Address				
Telephone				
Number				
E-mail				
Address				
Contact				
Person				
	Section 2- Manager	ment/Executive Mem	bers	
Title (Mr,Mrs)	Name & Surname	ID Number	Designation	



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Please indicate the sector where the organisation is active:

Sector	Tick	Sector	Tick
Agriculture		Tourism & Hospitality	
Manufacturing		Catering	
Cultural/Heritage/Arts		Contractors	
Electricity, Gas & Water		Retail & Motor Trade Repair Servises	
Recycling		ICT/Networking	
Other (specify)			

Section 3- Documents Required

Please attach the following documents:

Documents	Yes	No
Business Registration Certificate		
Valid Tax Clearance Certificate		
Certified ID Copies of Applicant(s)(not later than 3 months)		
Business Plan		
Company Profile		
3 Months Bank Statement of the business		
Proof of address (not later than 3 months)		
Motivational Letter outlining why your business must be supported/funded.		
Letter from Ward Cllr (stamped) confirming the existing of the business in a ward.		
Quotation of Items/Equipment to be supported.		
Proof of land ownership/ lease agreement.		



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Section 4- Project Details

What are the aims and objectives of the	
project?	
State the project activities with time frames?	
How will you measure the success of your	
project?	
When is your financial year end?	
Are your financial statements audited?	
Do you receive any state subsidies?	
If yes, please give details of department,	Department:
dates and amounts received.	
	Date:
	Amount Received:
Please indicate 3 priority areas for which	1.
funding is being requested	
	2.
	3.
Please identify one specific project and	Project Name:
motivate why it should be funded, include	
the budget and/or quotations	
	Motivation:



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List of Current Donors:			
Name	Amount		
Approached/Potential Donors:			
Name	Amount		
Section 5- Additio	nal Information		
 Include any photographs of your work motivate your proposal. 	that could be used to better explain or		
Include any other specific information that has not been requested that may be relevant to the proposal.			
NAME OF APPLICANT ON BEHA	ALF OF THE ORGANISATION		
SIGNATURE	DATE		