**ELIGIBILITY CRITERIA**

Micro Small Medium Enterprises are defined according to their concessional loan eligibility as follows::

|  |  |  |
| --- | --- | --- |
| **Enterprise Type** | **Maximum Loan Eligibility** | **Annual Interest Rate** |
| New and existing micro enterprises - earning less than $50,000 annually | $7,000 | 0.5% |
| Small enterprises - earning between $50,000 and $300,000 annually | $14,000 | 1.0% |
| Medium enterprises – earning between $300,000 and $1,250,000 annually | $21,000 | 1.5% |

In addition to the above Small and Medium enterprises must have been operational with at least 60 percent of employees from December 2019.

Priority under the Micro Entrepreneur Package will be given to applicants with unique skill sets who demonstrate an ability to create employment within a key economic sector and support the export of Fijian-made products. The skill sets and professional qualifications of all applicants will be determined through a review of training, qualifications, CV, references and other relevant documentation.

**ADMINISTRATIVE CHECKLIST**

1. Completed application form
2. Business registration
3. Tax Identification Number
4. Bank Account Details
5. Business Plan
6. Cash flow projections
7. Valid Business Licence (only for small and medium enterprises)
8. Latest Financial Statement (only for small and medium enterprises)
9. 2018 Tax Compliant (only for small and medium enterprises)
10. 2019 FNPF Compliant (only for small and medium enterprises)
11. Past six (6) Bank Statements (only for small and medium enterprises)

|  |
| --- |
| **PERSONAL DETAILS** |
| Full Name: |  | Personal Tax Identification Number |  |
| Residential Address: |  | Mobile No.: |  |
| Postal Address: |  | Telephone No.: |  |
| DOB: |  | Photo ID: |  |
| Fijian Citizen | Y / N | Email Address: |  |
| Gender*(Circle one)* | M / F | No. of Dependents |  |
| **BUSINESS DETAILS** |
| Business Name:  |  | Business Structure: *(Circle one)*  | Sole Trader/ Partnership/ Company/ Cooperative |
| Business Address: |  | Business Registration Number:  |  |
| Business TIN Number (Mandatory) |  | New or Existing Business |  |

|  |
| --- |
| **LOAN APPLICATION DETAILS** |
| Business Level:Loan Amount Requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Micro Small Medium |
| Utilisation: *(Please provide details of how the loan will be utilised e.g. purchase of materials, equipment’s, utensils, and etc.)* |
| Benefits: *(Please describe how the fund will help your business grow e.g. diversification, expansion, loans and etc.)* |
| Existing Loan: *(If you have existing loans please state under which credit institution and remaining term of payment)* |

|  |
| --- |
| **BUSINESS ASPECTS DETAILS** |
| Briefly describe your business: |
| Brief description of future expansion plans if funding request is approved: *(expand business, hire more employees, capital investment and etc.)* |
| Have you attended any business training/ seminar/ workshop? *(If yes, Include training name, organization and date of training)* |
| Comments on Financial Position (*Please provide any information you feel is important to support your Financial Position)*  |

|  |
| --- |
| **DECLARATION** |
| I hereby certify that the above information are true and correct to the best of my knowledge. I give my authorisation to request any required information regarding my account or financial arrangements with my bankers or financial institution or my creditor or government.I understand that any **false information** provided may disqualify me from the funding program. …………………………… ….../…../…... Applicant Signature Date |
| **CHECKLIST** |
| Business Registration Certificate | Valid Business License (Not applicable to Micro enterprises) |
| Business Plan | Valid Identification Requirement (*Driver License or Passport or FNPF Card or Voter Identification Card)*  |
| Company TIN Letter | Latest Financial Statement (Not applicable to Micro enterprises) |
| 2018 Tax Compliance (Not applicable to Micro enterprises)  | Bank Statement (Past six months for small and medium enterprises) |
| 2019 FNPF Compliance (Not applicable to Micro) | Supporting documents and any other information deemed important (quotations etc) |

|  |
| --- |
| **OFFICIAL USE ONLY** |
| **Receiving Officer** |
| Name: | Designation: |
| Office: | Location: |
| Signature: | Date Received: / /  |
|  |
| **Verifying Officer** |
| Name:  | Designation: |
| Comments:………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. |
| Signature: | Date: / / |
| **DECISION** |
| **Assessor**  | Comments:………………………………………………………………………………………………………………………………………………………………………………………………………… |
|  Approve Decline  | Amount Approved: **F$** |