



County & City
Enterprise Boards



Application Form For Feasibility/Innovation Grant

Freedom of Information:

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Ireland's EU Structural Funds
Programmes 2007 - 2013

Co-funded by the Irish Government
and the European Union



EUROPEAN REGIONAL
DEVELOPMENT FUND

Application Form For Feasibility/Innovation Grant

All questions marked with an asterisk (*) are mandatory

1. Contact Details

Gender* _____

Prefix (Mr., Mrs. Etc.)* _____

First Name* _____

Last Name* _____

Tax No.* _____

PPS No. _____

Address* _____

Telephone* _____ Mobile* _____

Fax _____ Email _____

If the applicant details are the same as the primary contact details please tick: _____

If not, please give contact details:

Applicant Contact Details (if different from Primary Contact Details)

Gender* _____

Prefix (Mr., Mrs. Etc.)* _____

First Name* _____

Last Name* _____

Tax No. _____

PPS No. _____

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Applicant Contact Details (if different from Primary Contact Details) (Cont'd)

Address* _____

Telephone* _____ Mobile* _____

Fax _____ Email _____

2. Applicant Details

(Please Tick)

Business Name*						
Stage of Business* (Please tick box)	Pre-Start Up		Start Up (<18 mths)		Growth (>18 mths)	
Website						
Date Trading Commenced*						

Applicant Type*

(Please Tick)

Sole Trader / Individual			
Company		CRO.no	
Partnership			
Community Group			
Cooperative			

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3. Previous Status of Promoter*

(Please tick)

Self Employed	Employed	Un-Employed	Training/Education

4. Promoters Background/Qualifications & Experience

Include details of all relevant experience and qualifications of each of the promoters involved in the project.

Please add CV's as attachments to this document

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5. Project Sector Details

What type of business are you involved in/hope to be involved in?*

(Please see page 14 for qualifying businesses in each sector)

Please tick and detail in the box below:

Business Services	
Clothing & Fashion	
Communications, Media & Entertainment Services	
Consumer Services	
Craft	
Electronics	
Engineering	
Environment/Green Technologies	
Food Manufacturing & Processing	
Food Primary Sectors	
Furniture/Light Consumer Goods Manufacture	
Manufacturing Other	
Medical Devices Manufacture	
Packaging Manufacturing	
Software/IT	

Please Describe Your Business / Proposed Business*

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6. Details of Proposal/Scope of Study

Background to proposal/purpose of the study (including description of the product or service to be developed):

7. Proposed Programme of Work and Timescale

Give details of the proposed programme of work to be undertaken and a timescale for this work:

8. Estimated Job Potential If Feasible* (Including the applicants)

	Current	
	Full-time	Part-Time
Male		
Female		
Total		

	Potential Year 1	
	Full-time	Part-Time
Total		

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9. Critical Factors

(What, at this stage, are critical factors which you believe need to be addressed e.g. technology; licensing; market; finance; quality standards; skills; intellectual property; branding; prototype development/design etc.)

10. By Whom Will The Work Be Carried Out?

(Indicate relevant qualifications and experience) Provide fee proposals from providers setting out scope of work to be undertaken and methodology.

11. Marketing

Markets to be researched, if any:

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12. Information Gathered to Date

Outline what knowledge you have at this stage in relation to market size, growth, other trends, competitors, and market strategy:

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13. Investment Costs*

Grant Details

<i>Estimated Expenditure</i>	
Own Labour Research	
Consultancy Fees	
Prototype Costs/ Innovation Costs	
Miscellaneous Costs	
Total	

<i>How do your propose to fund the study*</i>	
Investment in project from own resources	
Investment in project financed from borrowings	
Amount of Grant Assistance Sought (max. 60% BMW region)	
Other	
Total Investment in project	

14. Other Relevant Information

- a) Provide justification for assistance that may assist your application such as economic benefits in terms of R&D, jobs, import displacements, value added, exports etc.

- b) Cost incurred to date, if any:

- c) Have you discussed this proposal with any other agency? If yes give details, including response form agency.

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- d) Set out any other relevant information or comments you wish to make relating to the project:

15. Grant History*

- a) Will this project proceed without grant assistance

YES

NO

- b) Has the business or any of its promoters been in receipt of any other State Supports or E.U. supports?

YES

NO

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c) If YES above please give details including the date, amount and the purpose of the grant

Other Grants Provider	Date	Amount	Purpose

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16. Additional Information

- a) Are you in receipt of, or you will be an applicant for, any Social Welfare Support in respect of your own or your employee's employment?* *(please tick)*
- YES NO
- b) This application may have to be referred to other Agencies (on a confidential basis) as part of the Board's processing procedure. Do you consent to this?* *(please tick)*
- YES NO
- c) Do you agree to receive County Enterprise Board products and information? *(please tick)*
- YES NO
- d) Are you (or the company) registered for VAT (please tick) (Tax clearance certificates and C2 Certification is required for all claims/ payments in excess of €10,000 if approved. For Payments in excess of €6,350 a tax declaration will be required).*
- YES NO
- e) Do you propose making an application for seed capital?
- YES NO NOT SURE
- f) Do you propose making an application for BES funding?
- YES NO NOT SURE

Beneficiaries of grant aid should note that the acceptance of funding is an acceptance of their inclusion in the list of beneficiaries under Article 7(2) of the Implementation Regulation (EC) No 1828/2006. This list can be accessed on Border Midland & Western and Southern & Eastern Regional Assembly websites.

Other Supporting Information

Please attach the following as appropriate (tick items attached):

- i) Curriculum Vitae
- ii) Quotations
- iii) Certificate of Incorporation or company registration no. (company only)
- iv) Certified Accounts (in case of existing businesses)
- v) Photographs (if appropriate)
- vi) Other (please specify)

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17. Signature*

I hereby declare that the details given in this application, together with any supplementary information supplied are true and accurate

SIGNED _____ DATE _____

SIGNED _____ DATE _____

SIGNED _____ DATE _____

PLEASE NOTE:

*Application form and supporting information to be signed and returned to the Louth County Enterprise Board.
Completed application form to be emailed, with the signed hardcopy posted to the address on the back of this form.
Contact details can be found at the end of this application form.*

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Appendix 1

Application Check List

Application Form Completed	
Application Signed and Dated	
Additional Information	
Your Own Technical/Administrative Qualifications (C.V.)	
Quotations	
Certified Accounts (in case of existing businesses)	
Confirmation of Grant Aid sought from other Agencies	
Certificate of Incorporation (Companies Only)	

REMEMBER INSUFFICIENT INFORMATION WILL RESULT IN DELAYS

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Appendix 2

Sector Definitions

Business Services	Services provided to other businesses
Clothing & Fashion	Design and manufacture of clothing/Fashion
Communications, Media & Entertainment Services	Digital Media, Wireless Communications, Broadband, Animation, E-Learning, Media & Entertainment.
Consumer Services	Services provided to other consumers/general public
Craft	Manufacture Craft products
Electronics	Manufacture of components/sub supply
Engineering	Manufacture Aerospace, Agricultural Machinery, Automotive, Tanks & Vessels, Tool Making & Plastics
Environment/Green Technologies	Manufacturing & Delivery of Environmental/services/products and green technologies
Food Manufacturing & Processing	Manufacture and processing of Food
Food Primary Sectors	Primary production of Food
Furniture/ light Consumer Goods Manufacture	Manufacture of light consumer products.
Medical Devices Manufacture	Manufacture of medical devices
Manufacturing Other	Other manufacture not classified above
Packaging Manufacturing	Packaging Manufacture
Software/ IT	Development & delivery of software & IT services. E-Commerce

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