

The Biggest Deal Plus – 2023

(Youth Entrepreneurship Competition)

APPLICATION FORM

Note in terms for Entries

- Entrants must be between the ages of 16 and 34
- Must live in the municipal jurisdiction area
- Must provide original proof of address
- Winners will have to enter into a formal agreement, once awarded
- Must be able to attend various competition activities during the competition period (5 weeks)
- Prizes to the amount of R120 000.00 for FOUR (4) WINNERS

1.	Name & Surname / Naam & Van									
2.	Date of Birth / Geboorte datum	YEAR/MONTH/DATE ____/____/____								
3.	Fisiese Adres / Physical Address:									
4.	Contact details / Kontak Besonderhede	Cell Nr: _____ Email address: _____								
5.	Name of business (If applicable) / Naam van besigheid (indien toepaslik)									
6.	Town / Dorp									
		Grabouw	Botrivier	Caledon	Genadendal	Greyton	Villiersdorp	Riviersonderend	Myddleton	Tesselaarsdal

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7.	Please indicate the highest level of education / Spesifiseer asb die hoogste vlak van opleiding				
	None / Geen	Primary School / Primêre Skool	Secondary School / Sekondêre Skool	College / Kollege	University / Universiteit

8.	Please indicate whether you have received any training relevant to your business / Dui asb aan enige opleiding wat u ontvang het relevant tot u besigheid?		
	Type of training received / Aard van Opleiding ontvang	Year when the training was completed / Jaar wanneer die opleiding voltooi was?	Year when the training was completed / Jaar wanneer die opleiding voltooi was?

9.	Please mark which sector your business focuses on / Merk asb op watter sektor u besigheid fokus:								
	Agriculture / Landbou	Construction / Konstruksie	Manufacturing / Vervaardiging	Retail / Wholesales / Kleinhandel	ICT / IKT	Services / Dienste	Tourism / Toerisme	Informal Trading / Informele Handel	Other

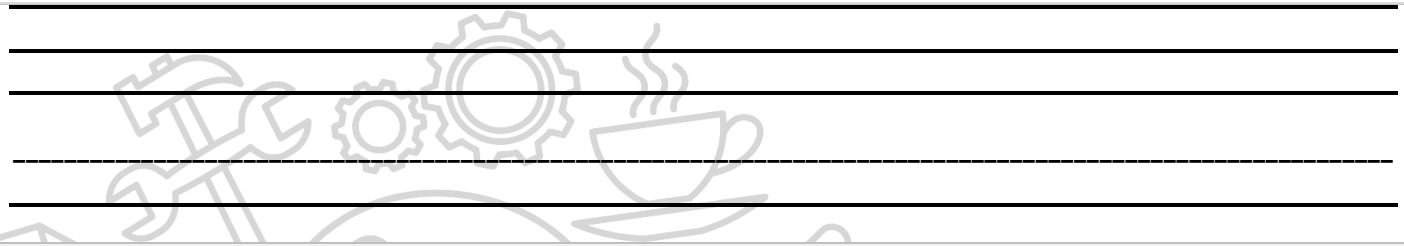
10.	Please indicate if you are a new businesses/ start-up or an existing business:						
	New Business	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Not Applicable:	<input type="checkbox"/>
	Existing Business	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Not Applicable:	<input type="checkbox"/>

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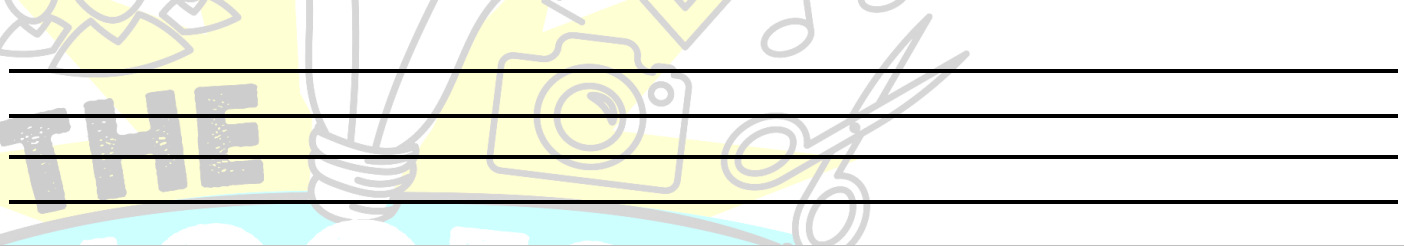
	If Existing business, number of years in operation / Indien bestaande besigheid hoe lank is die besigheid operasioneel:	_____
11.	Please indicate the type of your business:	
	Sole Proprietor / Eenmansaak <input type="checkbox"/>	Pty (Ltd) / Maatskappy <input type="checkbox"/>
	Co-operative / Kooperasie <input type="checkbox"/>	Informal (Not Registered) / Informeel (Nie-geregistreerd) <input type="checkbox"/>
12.	If new, explain your business idea. If existing, give a description of your business or what you do (a) the type of business; (b) the need the business seeks to satisfy (c) who your potential customers are; (d) where you will operate the business from; and (e) how you will deliver your product or service. / As dit nuut is, verduidelik jou besigheid idee. As dit 'n bestaande besigheid is, gee 'n beskrywing van jou besigheid of wat jy doen. (a) Die tipe besigheid; (b) Die behoefte wat die besigheid wil bevredig (c) wie is jou potensiële kliënte; (d) van waar af doen jy besigheid of wil besigheid doen; en (e) hoe gaan jy die produk of diens voorsien.	
	NEW BUSINESS: <input type="checkbox"/>	EXISTING BUSINESS: <input type="checkbox"/>
	Description of business / Beskrywing van u besigheid	_____ _____ _____ _____ _____ _____ _____
	Type of Business / Tipe besigheid	
	The need the business seeks to satisfy / Die behoefte wat die besigheid wil bevredig	

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Indicate who the potential Customers are/ Please indicate if you have existing customers
Dui asb aan wie u potensiële kliënte is (hoeveel, waar en watter dienste en / of u bestaande kliënte het (hoeveel, waar en watter dienste u aan hul tans verskaf.

Please indicate where the business will operate from / or is currently operating from / Dui asb aan van waar af doen u besigheid of wil besigheid doen?



How you will deliver your product or service / Dui asb aan hoe u die diens / produk gaan lewer

Indicate whether you have any existing infrastructure / Implements. If yes, what is the total value of it?



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<p>If your business require any infrastructure / implements, and if yes, the value thereof and how it will add value to your business? Or require any infrastructure / implements for your business / Dui asb aan of u bestaande besigheid enige infrastruktuur / implemente het</p>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
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13. Please indicate by ticking the boxes, if your business is registered for the following:

Business Registration / Besigheids-Registrasie <input style="float: right;" type="checkbox"/>	Trading Permit / Handelspermit <input style="float: right;" type="checkbox"/>	Tax Clearance Certificate / Belastingcertifikaat <input style="float: right;" type="checkbox"/>
BBEE Certificate / BBEE Sertifikaat <input style="float: right;" type="checkbox"/>	Business Bank Account / Besigheids Bankrekening <input style="float: right;" type="checkbox"/>	Central Supplier Database (CSD) Registration / Sentrale Voorsiener Databasis) <input style="float: right;" type="checkbox"/>
Other / Ander i.e. CIDB, PSIRA Certification etc: <input style="float: right;" type="checkbox"/>	If other, please indicate the name: <hr/> <hr/>	



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14. Choose from the list below, the three most critical interventions required to start or expand your business? In u opinie, kies die drie mees kritiese intervensies wat benodig word om u besigheid te begin of uit te brei?

Funding / Befondsing <input type="checkbox"/>	Mentorship / Mentorskap <input type="checkbox"/>	Sector specific Training / Industrie spesifieke opleiding <input type="checkbox"/>
Business Compliance / Besigheidsnakoming <input type="checkbox"/>	Marketing / Bemarking <input type="checkbox"/>	Access to markets / Toegang tot markte <input type="checkbox"/>
Equipment / Toerusting <input type="checkbox"/>	Business Training / Besigheidsopleiding <input type="checkbox"/>	Networking (Business – to - Business) / Netwerke (Besigheid tot Besigheid) <input type="checkbox"/>

15. Why did you start a business or want to start one?/Hoekom het u 'n besigheid begin of wil een begin?

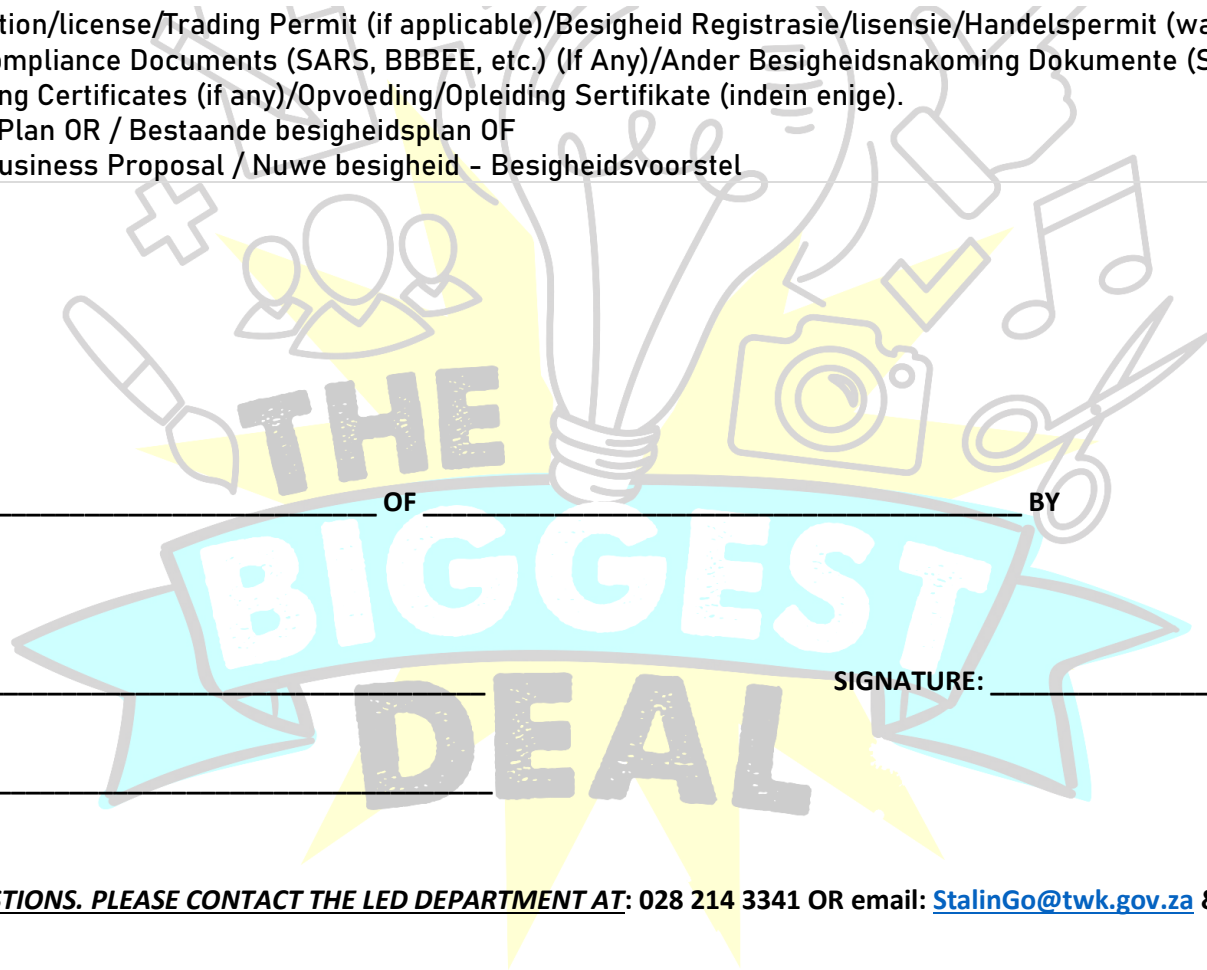
- I was retrenched / Ek was afgelê van my werk	- I inherited the business / Ek het die besigheid geërf <input type="checkbox"/>	- I can't not find another job / Ek kan nie 'n ander werk vind nie	- I did not make enough money where I was working / Ek het nie genoeg geld gemaak waar ek gewerk het nie
- I wanted to have my own business / Ek wou my eie besigheid hê	- Unhappiness with previous work / Ongelukkig met my vorige werk <input type="checkbox"/>	- I have the skills to run a business / Ek het die vaardigheid om 'n besigheid te bestuur	- I enjoy being in business / Ek geniet dit om besigheid te doen

- Other:

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16.	Please write a motivation not longer than 5 pages, why you want to participate in this competition and how it can contribute to your business growth and development? Verskaf asb 'n motivering, nie lander as 5 bladsye, waarom u wil deelneem aan hierdie kompetisie en hoe dit u besigheid kan help groei en ontwikkel?
17	Please attached or upload relevant documents to this application/ Heg asseblief aan of laai op relevante dokumente aan hierdie aansoek. <ul style="list-style-type: none">- Copy of ID/Afskrif van ID- Business Registration/license/Trading Permit (if applicable)/Besigheid Registrasie/lisensie/Handelspermit (waarv van toepassing toepaslik)- Other Business Compliance Documents (SARS, BBBEE, etc.) (If Any)/Ander Besigheidsnakoming Dokumente (SARS, BBBEE, ens.) (indein enige)- Educational/Training Certificates (if any)/Opvoeding/Opleiding Sertifikate (indein enige).- Existing business Plan OR / Bestaande besigheidsplan OF- New Business – Business Proposal / Nuwe besigheid - Besigheidsvoorstel



APPLICATION SIGNED ON _____ OF _____ BY _____

APPLICANT NAME: _____ SIGNATURE: _____

DATE: _____

FOR ASSISTANCE OR QUESTIONS. PLEASE CONTACT THE LED DEPARTMENT AT: 028 214 3341 OR email: StalinGo@twk.gov.za & DuncanPl@twk.gov.za