



Khyber Pakhtunkhwa
Federally Administrative Tribal Areas
and Balochistan
Multi Donor Trust Fund

ECONOMIC REVITALIZATION OF KHYBER PAKHTUNKHWA AND FATA (ERKF-II) PROJECT

Funded under the Multi Donor Trust Fund (MDTF) for Khyber Pakhtunkhwa, FATA and Balochistan

Grant Application Form (Rehabilitation Grant)

Registration No. _____

Date of Submission _____

(To be filled by PU SMEIDA)

Instructions for Applicants:

1. This form is free of cost.
2. For assistance in filling of the form please call 091-5254022 or email at erkfproject@gmail.com.
3. Please go through the Eligibility Criteria (given below) before applying for the Grant.
4. Please keep the receipt provided at the time of submission for future reference.
5. Submission of Application does not make the Project liable to process the case or award a grant.
6. Providing false information or using any unfair means/references may lead to application rejection.
7. The Project only awards matching grants that requires a minimum share of 50% by the eligible applicant.

SME ELIGIBILITY CRITERIA

- SME owner is a citizen of Pakistan doing business in Merged Area Districts (EX-FATA)
- SME is affected directly or indirectly by the conflict situation and/or natural calamities
- SME employs minimum of 3 (including owner) and maximum of 200 individuals (except that businesses owned by women and by returning TDPs in the Merged Areas Districts(EX-FATA) must employ at least 2 workers (including owner) and maximum of 200 individuals)
- SME business began operations on or before May 1, 2014
- SME was not a bank defaulter (except if crisis was the reason for default)
- SME has not received/approved/rejected grant under ERKF-I
- SME business is not on the official negative list (arms and ammunition, explosives, radioactive substances, security printing, alcoholic beverages, etc.)

PERSONAL INFORMATION

(To be filled by applicant)

Name _____

Gender: Male/Female _____ CNIC No. _____

Father's/Husband's Name _____

Mailing Address: _____

Permanent Address: _____

Phone# _____ Mobile #: (Mandatory) _____

Email (if any): _____

BUSINESS BASIC INFORMATION

Business Name _____

Nature of Business: _____

District/FR of business: _____

Are you a returning Temporary Displaced Person? _____

Is your business providing education, health and power generation and supply in remote areas?

Number of women employees/owners: _____

Type of Business : Manufacturing Trading Services Other _____

Legal Status: Sole Proprietorship Partnership Private Limited Company Other _____

Business Address: _____

Established Since: _____

Detail of Bank account:(Title, Bank, Branch, Account, Date of Opening) _____

NTN (if available) _____

BUSINESS DETAILS

Items	Pre-Damage value (Rs.)	Post-Damage value (Rs.)
Fixed Assets		
Land & Building		
Machinery & Equipment		
Others		
Total Fixed Assets		
Working Capital		
Raw Materials		
Finished Goods/Trade Goods		
Goods in Process		
Stock in Business		
Others		
Total Working Capital		
Additional Information		
Annual Sales		
Annual Expenses		
Net Income		
Number of employees		
Average Employee Salary		
Total Business Investment		
Human Resource Details		
Skilled Labor		
Unskilled Labor		
Supervisory/Managerial Staff		
Total Employees		

DAMAGE INFORMATION

Date(s) of Damages incurred/incident: _____

Reason for damages/calamity: _____

Damage to Assets	Damage Details (use extra page if needed)
Fixed Assets	
Working Capital	
Others	

REHABILITATION PLAN

Area of Support	Requested Support (Rs.)	Rehabilitation Needs
Infrastructure		

Replacement of machinery and equipment		
Working Capital		
Business Development Services(BDS)		

Total Requested Value of Grant: Rs. _____

Expected Impact of Rehabilitation:

Increase in Sales (in percentage): _____

Increase in Profits (in percentage): _____

Increase in employees (number): Female _____ Male _____

Why do you think the business will be sustainable if your grant request is approved?

Any type of financial facility/grant previously availed: Yes No

If Yes, Facility/Grant availed from: _____

Amount of Grant/Loan availed: _____

Date of Grant/Loan _____

Applicant's signature: _____

DECLARATION BY THE APPLICANT(S) ON A STAMP PAPER OF Rs100/-

I/(We) _____ S/o (W/o) _____ do, hereby, solemnly declare that I/(We) am/(are) neither studying as a full time student in any educational institution nor I/(We) am/(are) working in any Government or Semi Government Organization.

I/ (We) do hereby further declare that I/(We)are/(were) never involved in any criminal activity nor have been convicted by competent court of law and that the information provided is correct to the best of my/(our) knowledge and belief and nothing has been withheld. I/ (We) assure you that the Grant amount will be used only for the purpose and project in question in accordance with the terms and conditions as approved and finalized by the Project, ERKF. In case of misuse of funds, the entire Grant amount, if received, will be liable to be repaid and in case of remaining tranche(s) the grant shall be seized and

amount received have to be refunded immediately.

Date & Signatures: _____

LIST OF DOCUMENTS TO BE ATTACHED WITH GRANT APPLICATION

1. Three photocopies of National Identity Card duly attested by Government Officer/District Nazim/ Tehsil Nazim belonging to the area in which the applicant permanently resides or doing business.
2. Hand written/typed application on business letter head
3. Recommendation letter from relevant Chamber/Cluster Association (Optional)
4. Registration with Chamber/Cluster Association and/or SECP(whichever applicable)
 - a) In case of a partnership firm, a partnership deed duly registered with registrar of firms
 - b) In case of company, Certificate of Incorporation with Security & Exchange Commission of Pakistan (SECP); or in the absence of (a) and (b)
 - c) Registration/membership of Chambers/Cluster Association
5. List of existing machinery /equipment and any other assets
6. List of existing employees
7. Three quotations on proposed work and machinery/equipment
8. eCIB report from Habib Bank Ltd.(To be obtained by PU SMEDA ERKF).
9. Proof of business existence and ownership on or before May 1, 2014
10. A letter from DC/AC is mandatory for verifying ownership, existence and damages.
11. In case of TDP, attach documentary evidence

**ECONOMIC REVITALIZATION OF KHYBER PAKHTUNKHWA AND FATA (ERKF-II) PROJECT
RECEIPT OF GRANT APPLICATION SUBMISSION**

(Keep this receipt for future record)

Received an Application from Mr./Ms. (name, address and telephone no.) _____

on ____/____/20____ for assistance under Economic Revitalization of Khyber Pakhtunkhwa

and FATA (ERKF-II) Project for a grant for Rehabilitation amount's. _____

Amount in Words Rupees _____

Registration number allotted: _____

Signature and Stamp, Project Unit, SMEDA

Project Unit ERKF , Small and Medium Enterprise Development Authority Government of Pakistan

Ground Floor State Life Building The Mall Peshawar Cantt. Tel: 091 5254022-23

Email: erkfproject@gmail.com

For any complaint, contact PMU FATA ERKF Project, Tel No. 091-5200940 or email: info.erkffata@gmail.com

