

GIPFZA FORM 3

THE GOVERNMENT OF THE GAMBIA

THE GAMBIA INVESTMENT PROMOTION AND FREE ZONES AGENCY

(GIPFZA)

APPLICATION FOR FREE ZONE ENTREPRISE LICENCE

Serial No.

PROMOTER INFORMATION

1. Your company registered name and address:

Name _____

Address _____

Postal Address _____ City _____ Country _____

Tel. _____ Fax _____

Website _____ Email _____

b. Date of Incorporation of company

2. Summary of your company's activity

3. Your Parent Company's name and address (if different from "1" Above):

Name _____

Address _____

Postal Address _____ City _____ Country _____

Telephone _____ Fax _____

Website _____ Email _____

Particulars of Directors /Shareholders

Name of Directors	Nationality	No. & Value of Shares	Residential address

4. Any other information you wish to provide about your company and its activity

5. Please list any attachments such as Annual Reports, Feasibility Studies, Product literature

PART 1

1. PROPOSED Business Activity:

What is the Business Activity of the proposed company?

Commercial:

Manufacturing:

Services:

Please indicate specific activity

Please give a brief outline of the main operation of the proposed company in the space provided below, and attach a one page project summary:

2. What Free Zone Facility would you need to lease and when?

Note: GIPFZA cannot guarantee availability at the time of approval

Pre-Built Unit	No. of Units	No. of Units	When required (month/year)
Standard office			
Open office			
Warehouse			
Factory (<i>Light industrial Units with high power</i>)			
Plot of land (<i>Please state the area required in square metres</i>)			

Would you require any special facilities or services not listed here?

(If yes, please specify your requirement in the space provided below)

3. Work-force

What would be the estimated size of your work force?

Nationals

Employment Category/National	male/female
Managerial	
Skilled	
Un-skilled	

Expatriate

Employment Category/expatriate	male/female
Managerial	
Skilled	
Other	

4. Machinery/Equipment required for proposed project

Major items of	Condition (New or Used)	Country of Origin	Estimated Cost Machinery

5. Indicate the estimated annual production for the first 5 years of each product

1 st year Ton/Value, \$.		2 nd year Ton/Value, \$.		3 rd year Ton/Value, \$.		4 th year Ton/Value, \$.		5 th year. Ton/Value, \$.	
Import	Export	Import	Export	Import	Export	Import	Export	Import	Export

6. Raw Materials/ components required

Indicate raw materials/components required in the manufacture of proposed product(s) for the first on year

Raw material/ component	Quantity	Value (US\$)	Locally available or imported

7. Raw Materials/components required

Indicate raw materials/components required in the manufacture of proposed product(s) for the first on year

Raw material /component	Quantity	Value (US\$)	Source

8. Describe effluence and other pollutants that may result from your production and measures to control same.

9. Financial Conditions

a. Estimated total amount of capital for project US\$

b. Funding

- i . local Equity** - US\$ _____
- ii. Foreign Equity** - US\$ _____
- iii. Local loan** - US\$ _____
- iv. Foreign loan** - US\$ _____
- v. Suppliers Credits** - US\$ _____
- vi. Others (Specify)** - US\$ _____
- vii. TOTAL** - US\$ _____

c. Please indicate status of commitment of loan capital by proposed source

10. Training Plan

11. List of Documents attached

DECLARATION

I HEREBY DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL THE PARTICULARS FURNISHED IN THIS APPLICATION ARE TRUE AND IDEMNIFY THE AGENCY (GIPFZA) FOR ANY MISREPRESENTATION, OMISSION AND OR ANY INFORMATION THAT MAY IN FUTURE PROVE TO BE FALSE.

Date _____

Signature of Chief Executive Officer

Name (in block letters)

Note: Some projects may require clearance by the National Environment Agency if they have specific waste or effluent produced by the process. GIPFZA will inform promoter if this clearance is necessary.