

APPLICATION

BRAND DEVELOPERS INCUBATION HUB

SMME Membership Application

Applicant/Business Name (SMME):		
Entity Type: (Please mark the relevant option with a tick)		
Company (registered)	Yes	No
Close Corporation (CC)	Yes	No
Business Registration Number:		
Questionnaire: (Please mark/fill in the relevant option)		
How long has your organisation in existence?	New	Years
Has your organisation been registered and operational for a minimum of 12 months (up to a maximum of 36 months)?	Yes	No
Does your organisation have an existing contract (signed) to provide services (to an existing customer) ?	Yes	No
Is your organisation a minimum of 51% black owned (including Women Participation) ?	Yes	No
Authorized Representative:		
Name:		
Surname:		
Designation (Position held within the business):		
I, hereby declare that; I have been granted the necessary authority to represent the above mentioned business, and apply on behalf of the business for membership to the BRAND DEVELOPERS INCUBATION HUB, and understand that the businesses' successful membership to the BRAND DEVELOPERS INCUBATION HUB, is subject to approval and confirmation from BRAND DEVELOPERS, and furthermore declare that I have read and accepted the terms and conditions of the application. (You can request a copy of the terms and conditions by emailing: incubation@branddevelopers.co.za)		
Signed at (place)	this	date day of month 20