



South Dublin County  
**Enterprise Board**



## Application Form For Feasibility/Innovation Grant

**Freedom of Information:**

*The County & City Enterprise Boards Ltd. are subject to the Freedom of Information Acts 1997 and 2003. Under normal circumstances information supplied on grant application forms or in support of grant applications, is likely to be considered as commercially sensitive information and would not be disclosed to third parties. The County & City Enterprise Boards Ltd. will, in all cases where a request under the Freedom of Information Acts is made, consult with applicants before making a decision on disclosure of such information.*



Ireland's EU Structural Funds  
Programmes 2007 - 2013

Co-funded by the Irish Government  
and the European Union



# Application Form For Feasibility/Innovation Grant

All questions marked with an asterisk ( \* ) are mandatory

## 1. Contact Details

Prefix (Mr., Mrs. Etc.)\* \_\_\_\_\_ First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_

PPS No.\* \_\_\_\_\_

Address\* \_\_\_\_\_  
\_\_\_\_\_

Telephone\* \_\_\_\_\_ Mobile\* \_\_\_\_\_ Email \* : \_\_\_\_\_

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

If not, please give contact details:

### Applicant Contact Details (if different from Primary Contact Details)

Prefix (Mr., Mrs. Etc.)\* \_\_\_\_\_ First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_

PPS No.\* \_\_\_\_\_

Address\* \_\_\_\_\_  
\_\_\_\_\_

Telephone\* \_\_\_\_\_ Mobile\* \_\_\_\_\_ 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			

# Application Form For Feasibility/Innovation Grant

## 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*

# Application Form For Feasibility/Innovation Grant

## 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\*

# Application Form For Feasibility/Innovation Grant

## 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		

# Application Form For Feasibility/Innovation Grant

## 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:

# Application Form For Feasibility/Innovation Grant

## 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:

--

## 13. Investment Costs\*

### Grant Details

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

<b><i>How do your propose to fund the study*</i></b>	
Investment in project from own resources	
Investment in project financed from borrowings	
Amount of Grant Assistance Sought (max. 50% S&E-60%BMW)	
Other	
Total Investment in project	

# Application Form For Feasibility/Innovation Grant

## 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.

## Application Form For Feasibility/Innovation Grant

- 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

## Application Form For Feasibility/Innovation Grant

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

Other Grants Provider	Date	Amount	Purpose

# Application Form For Feasibility/Innovation Grant

## 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
- f) Do you propose making an application for BES funding?
- YES  NO

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  | <input type="checkbox"/> |
| ii) Quotations   | <input type="checkbox"/> |
| iii) Certificate of Incorporation or company registration no. (company only) | <input type="checkbox"/> |
| iv) Certified Accounts (in case of existing businesses)                      | <input type="checkbox"/> |
| v) Photographs (if appropriate)  | <input type="checkbox"/> |
| vi) Other (please specify)   | <input type="checkbox"/> |

# Application Form For Feasibility/Innovation Grant

## 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 Enterprise Board.  
Contact details can be found at the end of this application form.*

# Application Form For Feasibility/Innovation Grant

## 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**

# Application Form For Feasibility/Innovation Grant

## 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

**Contact Details:**

South Dublin County Enterprise  
Board  
3 Village Square  
Tallaght  
Dublin 24

T: (01) 4057073

F: (01) 4031234

E: [info@sdenterprise.ie](mailto:info@sdenterprise.ie)

**[www.sdenterprise.ie](http://www.sdenterprise.ie)**