Application Form - Collaborative Growth Programme



Step: 1

Application Information

Collaborative Growth Programme

The Collaborative Growth Programme provides support for networks of SMEs who want to work together to scope and exploit opportunities that could enhance their competitive edge. In order to be eligible for funding each group must consist of a minimum of four Northern Ireland SMEs, one of which must be an Invest Northern Ireland customer, and be willing to make this application on behalf of the other companies in the network.

You will need the following information to complete this application.

- Information on your business, such as details on the number of employees and your turnover.
- The names and contact details for the SME and Stakeholder members of your network.
- · A project description, agreed by all Network members.
- Clearly defined SMART objectives.
- · Details of project risks and mitigations for those risks.
- · An outline of project costs.

If you have all the required information to make this application on behalf of the Network, the application is likely to take 1-2 hours to complete. You can save your work and return to the application at any time.

Who is eligible to apply?

In order to make an application on behalf of a group, the Lead Company should be a current Invest NI customer.

Important information

- Any expenditure incurred prior to receiving a Letter of Offer from Invest NI will not be eligible for support.
- Support is paid net of VAT.
- Before submitting an application you shouldhave discussed your proposed project with an Invest NI representative.
- For further details on eligible costs, please visit: eligible-costs.
- To allow other people to access the application, please click the 'Add Contributors' button to the right and add them to the list of authorised contacts.
- · You should have read and understood the guidance notes.

Download Guidance Notes

Privacy

For details on how we use your personal data, including your rights, please see Invest NI's privacy notice.

As this financial support is sourced from public funds Invest NI will, in the interest of openness and transparency, proactively <u>publish limited</u> <u>information</u> on the scheme including:

- Name of applicant.
- · Application title.
- · Amount of assistance.

Accessibility

If you require an application form in an alternative format, please contact equality@investni.com or see our Equality Statement for further details.

A response is required for all question marked with *.

* I have read the guidance notes		

Step: 2

Application Form - Collaborative Growth Programme



General Company Information
* Company Name
ZAC Technology Solutions Ltd
Trading Name
Invest NI Sample Client
* Product Service Description Sample Application
Запріє Арріїсацоп
* Type of Business
Limited Company
* Date Established in NI
Date established in Northern Ireland. If pre- trading and not applicable please select
today's date. 01/06/2019
01/00/2019
Company Registration Number NI987654
* Country of Ownership Northern Ireland
Occupation of the comment to the
Country of Incorporation NI
* Industry Costor
* Industry Sector Automotive
* Is the Organisation a Social Enterprise?
Social enterprises are businesses that:
Have a clear social and/or environmerGenerate the majority of their income t
 Reinvest the majority of their profits
 Are autonomous of the state Are majority controlled in the interests
Are accountable and transparent
© No ∩ Yes
* Company Background
Please provide a brief history of your busines Voucher, please write 'Not Applicable'.
Sample company background goes here.

Application Form - Collaborative Growth Programme



SME Status

When making the calculations, you should use the data contained in the last approved annual accounts. Newly established enterprises that do not yet have approved annual accounts should make a declaration that includes a bona fide estimate (in the form of a business plan) made over the course of the financial year. This business plan should cover the entire period (financial years) until the entity will generate turnover.

EU SME Definitions EU SME Calculator

* Annual turnover

All income generating from the sales of products and/or supply of services. If pre-trading this may be 0. 250,000.00

* Staff headcount

The headcount corresponds to the number of annual work units (AWU), i.e. the number of persons who worked fulltime with the enterprise in question or on its behalf during the entire year under consideration. The work of persons who have not worked the full year, the work of those who have worked part-time, regardless of duration, and the work of seasonal workers are counted as fractions of AWU. The staff consists of:

- a. employees:
- b. persons working for the enterprise being subordinated to it and deemed to be employees under national law;
- c. owner-managers;
- d. partners engaging in a regular activity in the enterprise and benefiting from financial advantages from the enterprise. Apprentices or students engaged in vocational training with an apprenticeship or vocational training contract are not included as staff. The duration of maternity or parental leaves is not counted.

If pre-trading this may be 0.

* Current Employment in NI (FTE)

The figure provided should be for the latest accounting period. If pre-trading this may be zero. 10.00

* Annual balance sheet total

The annual balance sheet summarizes an organization's assets, liabilities and equity at the end of its financial year. Your answer should consist of the value of the total assets or, the value of the total liabilities and total equity. i.e. the balance sheet total is the sum of the fixed and current assets before deduction of current and long-term liabilities. (It is NOT the "net asset" value).

If your business is pre-trading, this figure may be 0.

100,000.00

Group Structure

* Does the company, its owners or a major shareholder own 25% or more of any other business? ○ Yes ○ No

Application Form - Collaborative Growth Programme



Business Locations

Add Location

Location Post Address Line 1 County Code Name 500 error test BT2 7ES 1 Bedford Square BT1 1BG Another location Po Box 210 Another location 69-71 Great Victoria Street County BT2 7AF Antrim ARMAGH 68 Station Road BT60 1RS

- <
- •
- 2
- <u>3</u>
- 4
- * Headquarters

After adding a location, or multiple locations, in the table above; please select the location where your business is headquartered. Another location

Application Form - Collaborative Growth Programme



Business Contacts Add Contact Portal Login Last Name Job Title First Name **Enabled** LED Abba Tester No Adam 2 No Adam 4 No Advanced Test Yes 1 2 3 4 5 6 7 8 9 • <u>10</u> * Main Contact Josh Bell

Step: 3

Project Details

Application Form - Collaborative Growth Programme



* Main Project Contact

Select Main Project Contact. (if project contact does not exist please click here to add). Josh Bell

* Project Title

Please enter a descriptive name for your application title (between 3-20 words). This application title, alongside limited details of your participation, may be <u>published</u> or <u>discoverable</u>. Therefore we recommend you choose a title that will not disclose commercially sensitive information about your project.

* Collaborative Project Summary

In a maximum of 750 words please tell us about the collaborative opportunity you and your partners want to investigate via this Scoping Study, including:

- Details of how the proposed project will help participating businesses to mitigate the effects of both COVID-19 and EU Exit;
- Details of any existing research or evidence you have already collected;
- An outline of how the group has come together;
- An overview of what value/expertise the stakeholders will bring to the project.

(250 words minimum)

Word Count: 0

Step: 4

Network Membership

Network SME Members

You will need to provide the details of other members that you propose to work with in the network. On this page, you should provide the details of any Small to Medium Enterprises (SMEs) and you can add the details of stakeholders and other non-SME type organisations on the following page.

To add a new Network SME Member, click the 'Add Network SME Member' button in the top right hand corner of the table. If you wish to change or delete the details of a Network SME member after adding them, you can click the drop down arrow on the right hand side of the Member's details to edit or remove them from the table.

Please note that all networks must consist of at least 4 NI based SMEs to be considered for support under this programme; applications not meeting this minimum requirement will be excluded from the shortlisting process.

* Are all of the organisations aware this application is being made on their behalf?

NB: Invest NI reserves the right to contact these organisations to discuss the project as part of the assessment process.

C Yes C No

Application Form - Collaborative Growth Programme



enter the detail	s of the memb	ers of your	SME network i	in the table below:		- 1
		or your		in the tubic below.		
Contact Person	Nature of Business	<u>Email</u>	<u>Telephone</u> <u>Number</u>	<u>Invest NI</u> <u>Customer</u>		
				O		
	:ME Member Contact	ME Member Contact Nature of Person Business	ME Member Contact Nature of Email Person Business	ME Member Contact Nature of Email Telephone Person Business Email Number	ContactNature of BusinessEmailTelephone NumberInvest NI Customer	ME Member Contact Nature of Email Telephone Invest NI Person Business Email Number Customer

Step: 5

Network Membership

Network Stakeholders

You will need to provide the details of other members that you propose to work with in the network. On this page, you should provide the details of any stakeholders and other non-SME type organisations. Stakeholder members may include, but are not limited to, large companies, other government departments; local councils; regulatory groups; potential customers; voluntary organisations; other funding bodies and/or academic instutions.

To add a new Network Stakeholder Member, click the 'Add Network Stakeholder Member' button in the top right hand corner of the table. If you wish to change or delete the details of a Network Stakeholder member after adding them, you can click the drop down arrow on the right hand side of the Member's details to edit or remove them from the table.

* Are all of the organisations aware this application is being made on their behalf?

NB: Invest NI reserves the right to contact these organisations to discuss the project as part of the assessment process.

• Yes ∩ No

Application Form - Collaborative Growth Programme



You must enter the details of the members of your Stakeholder network in the table below:

Add Network Stakeholder details

StakeholderContactArea ofEmailTelephoneOrganisationPersonExpertiseNumber

There are no records to display.

Step: 6

Project Benefits

* Describe the Project Benefits

Please detail how you anticipate this opportunity will be of value to:-

- The SMEs participating in the project.
- · The wider Northern Ireland economy and society.

Think in terms of innovative products, services and ways of working which can, ultimately lead to a range of monetary and non-monetary benefits - including enhanced skills, new export opportunities, knowledge transfer; and/or increased sales.

Key Project Objectives and Activities

Detail the SMART objectives for the project.

Your project should have a number of objectives which must be detailed using the table below. You can add a new objective by clicking the 'Add Objective' button in the upper right hand corner of the table. If you make a mistake, you can use the arrow at the end of each line to edit or delete each specific objective.

Please ensure that each objective is Specific, Measurable, Activity-Related, Realistic and Timebound. For further information on SMART objectives, please see the Guidance Notes or use the SMART Objective Toolkit to assist with planning what you should include in each section.

Download Guidance Notes Download SMART Objective Toolkit

Application Form - Collaborative Growth Programme



Ireland
Add Objective Specific Measurable Activity Realistic Timebound There are no records to display.
Step: 7
Project Risks
List the key project risks which you believe have a medium to high impact and medium to high probability of happening. You do not need to include information on risks which have a low probability of happening or that would have a low impact on the project. You can add a new risk by clicking the 'Add Risk' button in the upper right hand corner of the table. If you make a mistake, you can use the arrow at the end of each line to edit or delete each specific risk.
You should consider:
 Governance risks (eg. network membership; trust; collaboration) Commercial risks (eg. strategic, competitors, market changes) Operational risks (e.g. legislation, funding, cost control) and; COVID-19 and EU Exit risks
If there are no perceived risks to your project, please advance to the next section.
For more information on understanding different types of risk that your project faces, please see the Guidance Notes, or for details of risks faced by businesses more generally click here .
To ensure that you provide enough detail on your Risk Register, please see the Risk Register Template, linked below.
Download Guidance Notes Download Risk Register Template
Add Risk Description Impact Probability Mitigation There are no records to display.
Step: 8

Time contribution by Network members

Application Form - Collaborative Growth Programme



* How many hours (approximately) will members of the network contribute over the duration of the scoping study projec	How ma	anv hours	(approximately	will members	of the networ	k contribute over	the duration	of the scoping	na studv	project
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Project Costs

Please indicate the breakdown of the costs of your project. NB: The costs should not exceed £25,000. * Indicate the number of days of facilitation required. * What is the facilitator's daily rate? (£) Assume one day is equivalent to 7.5 hours. £400.00 per day, maximum. * Facilitation Total (£) This will be automatically calculated based on the figures above. You do not need to put anything in this field. * Please provide a rationale for the costs of the facilitator. * What is the total value of the costs of any study visits? (£) If there are no study visit costs, please input '0'. * Please provide a rationale for the cost of any study visits. If there are no study visit costs, please input 'Not applicable'. * What is the total value of the costs of any specialist consultancy? (£) If there are no specialist consultancy costs, please input '0'. * Please provide a rationale for the costs of any specialist consultancy. If there are no specialist consultancy costs, please input 'Not applicable'. * Total Project Costs (£) This will be automatically calculated based on the figures above. You do not need to put anything in this field.

Step: 9

Why is Invest NI funding required?

^{*} Please provide a rationale for the number of hours listed above.

Application Form - Collaborative Growth Programme



- * Without Invest NI will the entire project be cancelled?
- Yes No
- * Without Invest NI will the project start be delayed?
- Yes No
- * Without Invest NI will the project take longer?
- ⊙ Yes ⊜ No
- * Without Invest NI support will parts of the project not happen and/or will the scope of the project be reduced? Yes C No
- * Without Invest NI support will the entire project be completed outside of NI?
- C Yes € No
- * Without Invest NI support will parts of the project be completed outside of NI? C Yes © No

Step: 10

Supporting Documentation

If you wish to add supporting documentation to your application, such as technical documents, reports or financial information, you can do so in this section. Please note that you are not required to attach supporting documents, but may do so if you feel it may help support your application.

To attach documents, click the 'Attach Documents' button below. You should provide a title or explanation for each document to help provide insight into how it is relevant to your application.

Attach Documents

Authorisation

Application Form - Collaborative Growth Programme



By electronically signing and submitting this form, you confirm the following:

- The project described in this application is not already in receipt of, or is likely to be in receipt of, any public funding, nor does it form part of another project that Invest NI is currently supporting, unless otherwise detailed in this application.
- I have not applied to any other government department / local authority / research council in respect of the costs of undertaking this project outlined in this application, unless otherwise detailed in this application.
- I will notify Invest NI of any future applications for grant aid for this project.
- I/The applicant will not engage in any publicity/public relations activity for any subsequently funded project without the express consent of Invest NI
- I will allow access to the business to any authorised person for the purpose of carrying out an inspection in order to verify the accuracy of the information in this application.
- I will notify Invest NI in advance of carrying out any changes to the nature of this project.
- I understand that any expenditure incurred on this project outside of written approvals from Invest NI will not be eligible for financial
 assistance.
- I understand that Invest NI may release select information, relating to the participation of my business in this programme, in line with their Privacy Notice and their statutory obligibations under Freedom of Information.
- I understand that copies of all or some of the information provided in this application form may be provided to accountants, individuals
 and organisations, including governmental bodies, who Invest NI may consult with when assessing applications, administering a
 programme and evaluating the award of a grant or for research purposes. I authorise any enquiries necessary to be made (including
 using personal information to conduct appropriate checks with credit reference agencies) to confirm the information contained in this
 form and assess the proposal.
- I will provide any further information as may be required by Invest NI.
- · As lead company, we agree to process and pay any project costs relating to the project, as agreed by the collaborative group.
- I have read, understood and agree to the Disclosure, Publicity, Facilitator Recruitment, Profile Information and Confidentiality clauses (see Guidance Notes) and consent to use of the information provided for the purposes described.
- I confirm that the information contained in this form is true, accurate and not misleading as at the date of this form, and that Invest NI is entitled to rely on that information. I am authorised to apply for this grant.

Download Guidance Notes

All applications must be authorised in the case of a Limited	con	npany,	by a	Directo	or or the S	Secretary.	. In the case	of a Sole	Trader
or Partnership, by a Proprietor or Partner.									

•	••	 		

* Name

* Position in Organisation

Date