



THRIVE Phase II

(Formerly SMI programme)

Social Enterprise Loan Application Form

Due date: 12th November, 2010

Application form filling Instructions

- i) Entrepreneurs from Nairobi and its environs are encouraged to apply
- ii) Start- up enterprises are discouraged to apply.
- iii) Enterprises with loan application of less than KES 1 million will be given a priority.

Business Owner Personal Information

| | |
|----------------------------|--|
| Full Name | |
| Gender | |
| Citizenship | |
| Place of residence | |
| Date Of Birth | |
| Highest level of Education | |
| Occupation | |
| Tel | |
| Email | |

Business Information

1. Business Name:

2. Who is the owner(s) of your Business?

| | Names | Id No. | Gender | Year of Birth | Highest Level of Education |
|----|-------|--------|--------|---------------|----------------------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |

3. Location of the Business

District _____ Division _____
Town _____

4. Where do you distribute your products?

In areas closest to the business location
(Specify)

All over the district _____
All over the Division _____

All over Town _____

All over the country

Export to other countries (specify.....)

5. Your business registration

Company

Sole Proprietorship

Partnership

CBO

NGO

Other _____

6. Sectors that the business is based

Construction

Medicine (pharmacology)

Food production/Manufacturing

Trade

Agriculture (dairy, poultry, farming)

Other (specify).....

Medicine (treatment)

Consumer goods production

Business-to-business merchandises production

Service (such as hair salon/barbershop, child care, disabled care, jua kali – welding, vehicle service, weaving, posho mill, paint manufacturing, recycling, etc.)

7. What is/are the end product(s) of the business, or kind of the service provided?

8. How many years have you owned this business?

9. Please indicate amount of capital with which you started your business (starting capital)

10 What is a current capital (assets) of your business?

11. What is your business turnover or total sales in 2007, 2008 and 2009?

12. What is the maximum production capacity of your business?

13 a). What is the current production capacity of your business?

13 b) In the last 4 year (or less) what has been the cost and revenue flow of your business?. Use the table below to answer this question

| Business Expenses / Cost/Profits | 2007(KShs.) | 2008(KShs.) | Dec 2009(KShs.) | Sept 2010(KShs.) |
|--|-------------|-------------|-----------------|------------------|
| Cost of running your business e.g utilities expenses, rent, marketing salaries/wages | | | | |
| Revenue (income) | | | | |
| Gross Profit | | | | |
| Tax Paid (if any) | | | | |

14. How many employees do you have in your business?

Male _____ Female _____

15. How many of them are members of your family or relatives?

16. Are the premises for the business: Self-owned Rented

Other, specify.....

17. Do you

- Own all the production lines and equipment
- Own a part of them and rent another part
- Rent all of them
- Other, specify.....

18. Please describe production lines and equipment you are using in your business:

| Production line / Equipment type | Purchasing date | Production date (model of which year) | From where bought | Purchasing price (Ksh) |
|----------------------------------|-----------------|---------------------------------------|-------------------|------------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

19. For what purposes do you intend to spend the loan (please indicate all purposes)?

- Build new or expand the existing production facilities
- Purchase new equipment
- Purchase new production lines
- Other (specify)

20. Amount of loan required for the above purpose (in Ksh)

21. Please, indicate in the table below all items you will buy and their cost:

| # | Equipment type / production facilities/ Other | Number of units | Cost (Ksh) |
|---|---|-----------------|------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |

22. What will be the impact of the THRIIVE loan on your business? Which improvements do you expect?

i) Production/Service(quantity and /or quality):

ii) Employment:

iii) Quality of life of workers:

iv) Others:

23. If offered the loan, when would you anticipate start making your charitable repayment?

- Immediately after receiving the new equipment
- In some months after receiving the new equipment (specify.....)
- Other, specify

24. Within which period of time do you expect to repay the loan?

- 1 year
- 2 years
- 3 years
- Other, specify

25. Please indicate the charitable products or services you will donate to repay the loan, who your target recipients are, and the estimated value (retail) of the proposed products or services.

Target Beneficiary(ies): _____

The example below is for a business giving Bread on bimonthly basis.

Value of In-Kind Repayment:

| Kind Payment | May & June 2009 | July & Aug 2009 | Sept & Oct 2009 | Nov & Dec 2009 |
|------------------------------------|--------------------|--------------------|--------------------|-------------------|
| Quantity in crates | 30 | 30 | 30 | 30 |
| Price of Bread per crate (KShs.) | 500.00 | 500.00 | 500.00 | 500.00 |
| Total monthly repay (KShs.) | 15,000.00 | 15,000.00 | 15,000.00 | 15,000.00 |

26. Have you obtained any subsidies for your business development from other sources?

Yes No

If yes, specify year of receiving, amount, and name of an organization provided the subsidy:

Year of getting subsidy Amount Organization .

28. Have you obtained any bank loans for the business development purpose?

Yes No

If yes, specify year of getting, year of completing the repayment and the amount

Purpose of a loan Year of obtaining

Year of completing the repayment .. Amount

Please attach your Business Registration Certificate and copies of IDs of the business owners

6) References (3) not family members:

| | Name of the referee | Contact details- physical location, telephone, email |
|-----|---------------------|--|
| I | | |
| II | | |
| III | | |

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete, and that I am a private sector businessperson or civil society organization not affiliated with any governmental or political organization.

| | |
|-----------|--|
| Name | |
| Signature | |
| Date | |

Draw or explain directions to your Business Premises.

