#### FORM NO.

# APPLICATION FOR FISCAL INCENTIVES UNDER FISCAL INCENTIVES ACT NO. 5 OF 1982

SAINT VINCENT AND THE GRENADINES

#### **NOTE**

- (a) Application should be forwarded, in duplicate, to the Minister, Ministry of Trade, Industry and Consumer Affairs, Kingstown.
- (b) Only Companies incorporated and registered in St. Vincent and the Grenadines may be granted approved status.
- (c) All currency to be quoted in Eastern Caribbean dollars.
- (d) Provide complete answers to all questions.
- (e) Please note that the date of the commencement of construction must be within twelve months of the date of the granting of the application.
- (f) Please note that the date of commencement of production shall not be later than eighteen months from the construction date.
- (g) All information relevant to the determination of the local value added must be supported by documentary evidence.

#### A. IDENTIFICATION

1.	Name of Company							
2.	Registered Address							
3.	Date of Registration							
4.	If company has not yet been registered, give proposed name, address and date of registration (at 1, 2 and 3), indicating that name, address and date of registration, are not yet actual.							
5.	Is Company a subsidiary or successor of another Company?							
(a)	If yes, give name and address of Parent Company or Former Company.							
(b)	State nature of business carried on by Parent Company or Former Company.							
(c)	Is Parent Company or Former Company owned or controlled by citizens of:							
	(i) St. Vincent and the Grenadines							
	(ii) Other Caricom (Specify)							
	(iii) Other (Specify)							
6.	How many Directors does (will) the Company have?							

		and Company Secretary.	
	8.	Have any persons associated with this application, been involved with any similar project in the Caribbean Common Market (CARICOM)?  If yes, give particulars.	t
В.	FINA	ANCE	
	1.	Company's Share Capital	
	(a)	Nominal or Authorised	
		No Value	
	(b)	Issued (or to be issued to commence production)	
		NoValue	
	(c)	Paid - Up	
		NoValue	
	(d)	Countries in which Shares will be/have been issued	
	2.	Names, Nationalities and Domiciles of Shareholders and proportion of Issued Share Capital held/to be held by each.	•
	3.	State amount of Loan Capital obtained by the Company, Sources and the authorised limit	
	of bo	rrowing	

Give names, nationalities and domicile of Chairman, Managing Director, other Directors

7.

No	Value
<b>C</b> :	
Give	amount of capital invested or to be invested in approved operations.  To Date End of End of
	First Year Second Year
(i)	Land \$\$\$
(ii)	Buildings/ Leasehold Improvements
(iii)	Machinery and Equipment
(iv)	Other Fixed Assets
(v)	New Working Capital
Othe	r
	TOTAL \$ \$ \$
	estimates of dividends and other distributions of earnings to be made durally period to:
(i)	Vincentian Nationals
(ii)	Other CARICOM Nationals (Specify)
(iii)	Others (Specify)
Givo	estimates of any royalties, interest, management and Patent Charges to be ma
	nacon commo
In C	ide CARICOM

Is factory building already available?

C.

1.

State also whether or not building is/will be owned by company or leased by Company
Give general description, size and location of factory
Give date production is due to begin or has begun.
Give technical details of manufacturing processes involved and state whethe manufacturing rights are required and will be available to the Company.
Explain how the Company will provide for the technical expertise on the manufacturing processes.
Describe the products for which approved status is being sought.
Is approved status being sought for the Company's entire operations?
If not, give particulars of other operations which the Company carries out or proposes t carry out.

8. In respect of plant and equipment to be used, give the following (small items may be grouped together and classified as miscellaneous):

Item	Quantity	Value	Source	Condition
,				

9. With respect to raw materials, components, packaging materials, fuel, etc. to be used, give the following.

		Year		1 Year		Full Pro	Full Production	
Item	Source	Quantity	Value	Quantity	Value	Quantity	Value	

## D. OUTPUT AND MARKET

1. State estimated annual output (ex factory) of approved products:

	Yea	ar 1	Yea	ar 2	Full Production		
<b>Products</b>	Quantity	Value	Quantity	Value	Quantity	Value	
TOTAL							

- 2. Give year when full production is expected to be achieved:
- 3. Give details in the table following of the projected marketing of approved products.

	Other	Other	Year 1	Year 2	Full Production
	Caricom	Countries			

									7	
Products	Locally	(Specify)	(Specify)	Quantity	Value \$	Quantity	Value \$	Quantity	Value \$	\$
					Ψ		Ψ			
TOTAL										
TOTAL										

4.	Give estimated annual depreciation charge on plant, machinery, equipment and
	spare parts.

### E. EMPLOYMENT

1. If work and residence permits are required for expatriate personnel, give details below:

Name	Nationality	Position	Expected Length of Stay

2. Give details of Company's Proposed Programmes for the training of local personnel.

3. Give details of special skills and experience the management possesses in the particular line(s) of production in which the Company will be involved locally.

4. Give details below of the number and remuneration of persons employed or expected to be employed in proposed approved operations.

	Year 1		Year 2		Full Production	
Category of Workers	No.	Annual Salaries/ Wages	No.	Annual Salaries/ Wages	No.	Annual Salaries/ Wages
Managerial/ Technical						
Clerical						
Skilled						
Un-Skilled						
Other						
TOTAL						

## F. SPECIAL REQUIREMENTS

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1.	Last.	requirements	tor:

(a) Utilities

(b) Communications

(c) Waste Disposal

۷.	If yes, describe briefly.
3.	Please give any other relevant information.
particu	by that to the best of my knowledge, the particulars given above and also the lars contained in all supporting documents are, in the case of facts, accurate and, case of estimates and projections, realistic in the light of information currently le.
Name o	of person submitting application on behalf of the Company.
Positio	n held or to be held in the Company.
Addres	S
Teleph	one NumberFax
Signatu	re Date