

**SMALL BUSINESS RELIEF FUND 2023 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Application Form**

*The Small Business Relief Fund (SBRF) was developed by the Government of Montserrat (GoM) to provide financial relief to businesses still being impacted negatively by the economic downturn brought on by the COVID-19 pandemic.*

Please fill in all the required information below. Should you require assistance with completing the form or preparing/accessing the supporting documents, you may contact the Trade Officer (contact information provided at the end of this form).

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| **SECTION 1: PERSONAL DETAILS** | | |
| Name: | | Address: |
| **First:** | **Last:** |
| DOB: (dd/mm/yyyy) | | Cell No.: |
| Email: | | Home Tel.: |

|  |  |
| --- | --- |
| **SECTION 2: BUSINESS DETAILS** | |
| Business Name: | Business Registered:  YES **□**  NO **□** |
| Business Address: | Registration No.: |
| Email Address: | Tel. No.: |
| Type of Business Activity: | |

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| **SECTION 3: REQUEST FOR FUNDING**   * *A business is eligible for a maximum grant of EC$5000.00.* * *If you received funding under the Enterprise Development Scheme or the first round of the SBRF you are not eligible for this grant.* * *Funding cannot be used for purchase of motor vehicles or related expenses, items for resale, to pay utility bills or duties.* | |
| 1. Please tell us briefly what the funding will be used for: | |
| 1. What is the total amount of funding requested? Please submit copies of quotations to support your request. | |
| 1. Did you apply to the Enterprise Development Scheme (EDS) or Small Business Relief Fund 2022?   YES **□**  NO **□** | 1. Was your application successful?   YES **□**  NO **□** |
| *I hereby certify that the above statements and attached documents are true and correct to the best of my knowledge. I also understand that submitting false information may disqualify me from receiving assistance.*  Signature: ………………………………… Date: ……………………….. | |

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| **CONTACT INFORMATION** |
| **Submit completed application to** [**minfinmail@gov.ms**](mailto:minfinmail@gov.ms) **and copy to** [**hackettr@gov.ms**](mailto:hackettr@gov.ms)  **For the attention of:**  **Mrs. Ritchlyn Duke-Hackett**  **Trade Officer**  **C/o Ministry of Finance & Economic Management**  **Government Headquarters**  **Brades**    **Telephone:**  **Trade Office: 664 491 2066**  **Ministry of Finance: 664 491 2777** |