



MINISTRY OF TRADE AND INDUSTRY
SME Certification Intake Form

Please fill this form in to apply for the SME Certificate issued to qualifying Small and Micro Enterprises.

A: Basic business and financial information

Registered Business Name:				Registration Number:			
Physical Address:							
Postal Address:				City:		Region:	
Location Status: (tick one)		Rural area	<input type="checkbox"/>	Urban area	<input type="checkbox"/>	Industrial Park	<input type="checkbox"/>
		SME module	<input type="checkbox"/>	EPZ	<input type="checkbox"/>		
Telephone:		Fax:		Email:		Contact Person:	
Legal Status: (tick one)		Closed Corporation	<input type="checkbox"/>	Sole Proprietary	<input type="checkbox"/>	Pty (Ltd)	<input type="checkbox"/>
		Public Ltd	<input type="checkbox"/>	Other: (specify) <input type="text"/>			
Incorporated Company (Inc)		<input type="checkbox"/>	Section 21 Company (NGO)		<input type="checkbox"/>		
Date Established:				Vat Registration Number:			
Capital employed: N\$				Last year's turnover: N\$			
Projected turnover: N\$		Annual expenditure: N\$			Production Capacity pm N\$		

B: Ownership information

Salutation:		Name(s):			Surname:			Percentage owned:	
Namibian ID #:			Passport #:			Citizenship:			
Gender: Male / Female		Postal Address (full):							
Telephone:			Fax:			Bankers:			
Qualification: (tick one)		Unskilled	<input type="checkbox"/>	Grade10	<input type="checkbox"/>	Matric	<input type="checkbox"/>	Diploma	<input type="checkbox"/>
		Degree	<input type="checkbox"/>	PhD	<input type="checkbox"/>	Prof	<input type="checkbox"/>		
Salutation:		Name(s):			Surname:			Percentage owned:	
Namibian ID #:			Passport #:			Citizenship:			
Gender: Male / Female		Postal Address (full):							
Telephone:			Fax:			Bankers:			
Qualification: (tick one)		Unskilled	<input type="checkbox"/>	Grade10	<input type="checkbox"/>	Matric	<input type="checkbox"/>	Diploma	<input type="checkbox"/>
		Degree	<input type="checkbox"/>	PhD	<input type="checkbox"/>	Prof	<input type="checkbox"/>		
Salutation:		Name(s):			Surname:			Percentage owned:	
Namibian ID #:			Passport #:			Citizenship:			
Gender: Male / Female		Postal Address (full):							
Telephone:			Fax:			Bankers:			
Qualification: (tick one)		Unskilled	<input type="checkbox"/>	Grade10	<input type="checkbox"/>	Matric	<input type="checkbox"/>	Diploma	<input type="checkbox"/>
		Degree	<input type="checkbox"/>	PhD	<input type="checkbox"/>	Prof	<input type="checkbox"/>		
Salutation:		Name(s):			Surname:			Percentage owned:	
Namibian ID #:			Passport #:			Citizenship:			
Gender: Male / Female		Postal Address (full):							
Telephone:			Fax:			Bankers:			
Qualification: (tick one)		Unskilled	<input type="checkbox"/>	Grade10	<input type="checkbox"/>	Matric	<input type="checkbox"/>	Diploma	<input type="checkbox"/>
		Degree	<input type="checkbox"/>	PhD	<input type="checkbox"/>	Prof	<input type="checkbox"/>		

If there are more owners, then please attach their details, as specified, to the back of this form. Thank you.

General operations and employment information

In which Business Sector do you operate? Tick only one box please.

If you operate in the Primary Sector, tick the relevant industry below:																
Mining	Coal	<input type="checkbox"/>	Diamond	<input type="checkbox"/>	Gold	<input type="checkbox"/>	Iron	<input type="checkbox"/>	Lead	<input type="checkbox"/>	Silver	<input type="checkbox"/>	Tin	<input type="checkbox"/>	Tourmaline	<input type="checkbox"/>
	Uranium	<input type="checkbox"/>	Other Precious Stones (specify):									<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agriculture	Crops	<input type="checkbox"/>	Livestock	<input type="checkbox"/>	Grapes	<input type="checkbox"/>										
Fishing	Sea fishing	<input type="checkbox"/>	Fish farming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	Please Specify:															

Or If you operate in the Secondary Sector, tick the relevant industry below:															
Manufacturing	Automotive	<input type="checkbox"/>	Arms & Ammunition	<input type="checkbox"/>	Beverages & Alcohol	<input type="checkbox"/>	Chemicals	<input type="checkbox"/>	Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Electrical	<input type="checkbox"/>	Furniture	<input type="checkbox"/>	Mineral water	<input type="checkbox"/>	Clothing	<input type="checkbox"/>	Leather Works	<input type="checkbox"/>	Shoes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Machinery	<input type="checkbox"/>	Medical	<input type="checkbox"/>	Soaps & Cosmetics	<input type="checkbox"/>									
Construction	Houses & Repairs	<input type="checkbox"/>	Bridges	<input type="checkbox"/>	Large Structures	<input type="checkbox"/>	Roads	<input type="checkbox"/>							
Woodwork	Furniture	<input type="checkbox"/>	Wood Sculptures	<input type="checkbox"/>	Artistic Works	<input type="checkbox"/>									
Other	Please Specify:														

Or If you operate in the Tertiary Sector, tick the relevant industry below:															
Tourism	Accommodation	<input type="checkbox"/>	Backpacking	<input type="checkbox"/>	Boating	<input type="checkbox"/>	Cruises	<input type="checkbox"/>	Eco	<input type="checkbox"/>	Flying Safaris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Hiking	<input type="checkbox"/>	Hunting	<input type="checkbox"/>	Road Safaris	<input type="checkbox"/>	Transport	<input type="checkbox"/>	Catering	<input type="checkbox"/>					
Retail	Food & Beverages	<input type="checkbox"/>	Clothing	<input type="checkbox"/>	Soaps & Cosmetics	<input type="checkbox"/>	Shoes	<input type="checkbox"/>	Car Parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Meat & Animal Products	<input type="checkbox"/>	electronic Products	<input type="checkbox"/>	Pharmaceuticals	<input type="checkbox"/>									
Health	Medical Consulting & Treatment			<input type="checkbox"/>	Medical Transport & evacuation			<input type="checkbox"/>	Electrical & Electronics				<input type="checkbox"/>		
Transport	Passenger Transport		<input type="checkbox"/>	Goods Transport		<input type="checkbox"/>									
Food & Beverage	Specify:														
Education	Primary	<input type="checkbox"/>	Secondary	<input type="checkbox"/>	Tertiary	<input type="checkbox"/>	Learning Assistance	<input type="checkbox"/>	Library	<input type="checkbox"/>					
Financial	Accounting & Bookkeeping			<input type="checkbox"/>	Micro Loans		<input type="checkbox"/>	Specify:							
Other	Please Specify:														

Main Products & Services:																	
Other Products & Services:																	
Were you awarded a tender last year? YES <input type="checkbox"/> NO <input type="checkbox"/>																	
Number of Employees who are: Male:			Female:		Skilled:		Unskilled:		Namibian:		Foreign:						
Employment created in: 1990:			2002:		2003:		2004:		2005:		2006:		2007:				
2008:		2009:		2010:		2011:		2012:		2013:		2014:		2015:		2016:	
List training required by your company:																	
List technology required:																	
Other relevant information:																	
Is the information supplied true and correct to the best of your knowledge?										For office use only Certificate Valid From							
Signature _____ Name _____ Date _____																	

Please attach Copies of the following Documents: (1) Copy of Registration Certificate and (2), Social Security Commission Good Standing Certificate not older than 3 months, (3) VAT Good Standing Certificate not older than 3 months and (4) Certified Copies of IDs of all members/owners of the Company