#

# B.START 2021

# Progress Review - Report No. 1

**Beneficiaries**

* This report is to be used by eligible undertakings that are benefiting from the B.Start 2021 Scheme. It is to be submitted every 6-months or as detailed in the Letter of Approval together with the Claim Form and any other supporting documentation requested.
* Beneficiaries of **Pre-Business Plan Support** should submit this report after six (6) months from the first disbursement and again when requesting the final disbursement.
* Beneficiaries of **Post-Business Plan Support** should submit this report after six (6) months from the first disbursement and every six months thereafter or as detailed in the Letter of Approval.
* All documentation and information submitted as part of the Claim Form will be treated as confidential.
* All replies must be clearly explained and substantiated.
* Only electronically filled in reports will be accepted. Should the report be hand-written or should the format of the report be altered, it will not be accepted.
* Further information, as well as information and guidance on the filling in of this report may be obtained by contacting Malta Enterprise during office hours or by calling 144 or via email on info@businessfirst.com.mt.
* Malta Enterprise may request further information.

**How to submit your Claim Form and Report:**

The Claim form and this Report are to be initialled on each page and signed. A scanned copy together with supporting documentation are to be sent via email on claims@maltaenterprise.com or via post to Malta Enterprise, B.Start, G'Mangia Hill, Pieta.



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| 1. Applicant Details |
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| 1.1 Name of Applicant: |
| This section should specify the legal name of the enterprise as defined in the Memorandum of Articles. In the case of Partnerships and Co-operatives the name outlined in the deed of partnership should be used in this section. In the case of Sole Traders, the name of the sole trader shall be inserted. |       |
| 1.2 Registration Identification Number:  |
| The registration number is the official registration number of the co-operative, company or partnership as defined in the Companies Act – Chapter 387 of the Laws of Malta. In the case of Self Employed, this should be the corresponding Identity Card Number. |       |
| 1.3 Letter of Approval Reference:  |
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| 1.4 VAT Number:  |
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# **2. Business Plan and SWOT Analysis**

##  2.1 Current Situation

##  2.1.1 Achievements to date

## 2.1.2 Highlight any changes to the Business Plan / Application Form.

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| 2.2 Current Challenges  |
|       |
| 2.3 Investments carried out and financial standing  |
|      *If there have been any changes to the Investment Cost Breakdown submit an updated version.*  |
| 2.4 Goals for next six months      |
| 2.5 Number of Full Time Employees  |
|       |
| 2.6 Number of Part-Time Employees *(applicable to pre-business plan support only)* |
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| **3. Checklist of Documents**  |
| Kindly use the following checklist of required documents to ensure that you enclose all the necessary documents. Kindly tick all the documents that you will be submitting together with this Report. |
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| [ ]  Claim Form completely filled in and duly signed[ ]  **Annex 1**: Employment list of the beneficiary from Jobsplus Corporation. **Note to Beneficiaries:** Should you wish Malta Enterprise to request a copy of the Employment List from Jobsplus on your behalf, you are kindly requested to fill in the below authorisation. This will authorise Malta Enterprise to request the Employment List whenever is required for the purpose of processing the claims under the B. Start Scheme. **Authorisation:** For the purpose of processing claims, I / we the undersigned, authorise Malta Enterprise to obtain directly from Jobsplus the Employment List (details and signatures of employee/s or company to be entered in the table below).

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| --- | --- | --- | --- |
| **Name & Surname (company or self-employed)**  | **Date of Birth** | **ID Card Number / Company Registration** | **Signature** |
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Name & Surname Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Any beneficiary whose authorisation is not provided in the above table must present the Jobsplus Employment History directly himself otherwise the claim would not be processed. [ ]  **Annex 2:** Updated Investment Cost Breakdown (if applicable)  |

**4. Declarations****4.1 Personal Data Protection** Processing of any personal information provided in this form is authorised by the Consent Form submitted with the application and will be processed in accordance with the Corporation’s data policy and the Data Protection Act, Cap 440 of the Laws of Malta and shall be treated in the strictest confidence.**4.2 Cumulation of Aid**The undersigned declares that aid approved under this incentive is in line with the terms and conditions set out in the Incentive Guidelines and in line with Cumulation Article 8 of the Commission Regulation (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty. **4.3 Double Funding** The undersigned confirms that there has not been any approval or has been granted any public funding, financing or fiscal benefit in respect to the cost items included in this request for aid and will not seek funding or fiscal benefits for these cost items through other **National** and/or **European Union** measures. Such measures may include:* Schemes administered by Malta Enterprise, the Planning and Priorities’ Coordination Division (PPCD), the Measure and Support Division, the Tourism and Sustainable Development Unit (TSDU), the Employment & Training Corporation (ETC), the Malta Council for Science & Technology (MCST), the Regulator for Energy and Water Services (REWS) and government funded schemes operated by other entities (such as JAMIE financial instrument).
* Schemes funded through ERDF, ESF, Cohesion Fund, TEN-T Budget, EAFRD, EFF, LIFE+; Horizon 2020 and other European Union programmes/instruments.

**4.4 Outstanding Recovery Order** The undersigned confirms that the applicant is not subject to an outstanding recovery order following a previous Commission decision declaring an aid illegal and incompatible with the internal market should be excluded from the scope of this Regulation. **4.5 Transparency Obligations** For any individual aid awarded in excess of EUR 500 000, the details of the beneficiary; the aid awarded; and the project details; shall be published as provided for in Article 9 of the COMMISSION REGULATION (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty.By submitting this application, I hereby acknowledge that the Corporation shall abide with any applicable transparency rules and may publish and make available to third parties information as required by such rules.    |

# **5. Signatures**

The undersigned hereby authorises Malta Enterprise Corporation to process the data contained in this form for the purpose stated above and declare that the information on this form and any other information given in support of this report is correct to the best of my knowledge.

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| Name of Applicant (full legal name) |  |

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| Name and Surname of signatory authorised to represent the Applicant (CAPITAL LETTERS) |  |

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| Position in Establishment |  |

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| Signature & Company Stamp |  |

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| Date | Click here to enter a date. |