1. **Business Details**

|  |  |
| --- | --- |
| Business Name\* |  |
| Business Address\* |  |
| Business Postcode\* |  |
| Telephone Number\* |  | Mobile |  |
| Email Address |  |
| Website |  |
| Companies House Standard Industrial Classification Code (SIC Code) |  |
| Company Sector |  |
| Geographical Location | GBSLEP □ | Black Country LEP □ | The Marches □ |

1. **Owners/Directors/Partners/Key Contact**

|  |  |  |  |
| --- | --- | --- | --- |
| Title\* | First Name\* | Family Name\* | Position\* |
|  |  |  |  |
|  |  |  |  |

1. **About Business and its Project**

|  |
| --- |
| What is the legal status of the Business? [please tick]\* |
| Sole Trader | □ | Partnership | □ |
| Limited Company | □ | Community Interest Company | □ |
| Is the Company a part of Group | YES □ | NO □ | If yes, please confirm the percentage of ownership by another enterprise or the percentage of your ownership of another enterprise? |
|  |
| Nature of Business |  |
| Date Company started trading |  |
| How many people does the Company employ? (FTE) |  | What was annual turnover in the last financial year? (£) |  |
| Is the Company State Aid compliant? | YES □ | NO □ | Does the proposed Project appear to be eligible? | YES □ | NO □ |
| Is the Project likely to go ahead without the Innovation Voucher Grant? | YES □  | NO □ | Does the need for the Innovation Voucher appear to be genuine? | YES □  | NO □ |

Signature: …………………………………………….

Name: …………………………………………….

Position: …………………………………………….

Date: …………………………………………….