



MAJJISTRAL ACTION GROUP FOUNDATION

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European Agriculture Funds for Rural Development (EAFRD)

Rural Development Programme for Malta 2007 – 2013 LEADER

Measure 313- Encouragement of Tourism Activities Application Form



This measure falls under the **PROJECT** category under Priority Axis 3 of Malta's Rural Development Programme (RDP) 2007 – 2013, and is part financed by the European Agricultural Fund for Rural Development and falls under the responsibility of the Ministry for Sustainable Development, Environment and Climate Change.

Should you have any queries with the compilation of this form, contact Majjistral Action Group Foundation (MAGF) or email to info@leadermajjistral.eu or call number 2099 2080

It is to be noted that any beneficiaries who have running projects under other calls of Measure 313 can still apply under this call.

Please read the accompanying ‘Guidance Notes for submission of Applications for funding under Measure 313 – Encouragement of tourism activities before completing this Application Form. Furthermore, the Assistance Notes annexed to this Application Form are to be followed throughout the compilation of this Application Form.

The information you provide in your application form will be used to check solely the eligibility of your project for approval of the grant in accordance with the Data Protection Act. If there is insufficient space to answer any question please continue on a separate sheet and attach to your Application Form.

Applicants are to check that **all** necessary supporting documents are submitted together with this form. Following submission, the authority may request additional material. The Applicant has 15 days from the date of the receipt of the notification letter to submit requested information for the Application to remain valid. Only Application forms submitted by hand will be accepted.

Please complete this document in block letters or type.

Section 1 – General Applicant Details

Name of Organisation	<input type="text"/>
Postal Address	<input type="text"/>
Phone number	<input type="text"/>
Fax number	<input type="text"/>
Mobile Number	<input type="text"/>
Email Address	<input type="text"/>
VAT number (if applicable)	<input type="text"/>
MFSA number (if applicable)	<input type="text"/>

Q1.2 Type of organisation

Choose from the list below
- Local Council ¹ <input type="checkbox"/>
- Private Enterprise ² (small enterprise employing 0-49 persons) <input type="checkbox"/>

Q1.3 Legal status

Choose from the list below:
- Public organization <input type="checkbox"/>
- Private Entity <input type="checkbox"/>

Please attach the legal act by which the Entity is constituted.

¹ Only Local councils active members of MAGF are eligible to apply under this scheme.

² Only private enterprises operating within the sectors identified under NACE 55 and 92 of Commission Regulation 1628/2006 are eligible to apply under this scheme.

Q1.4 Size of the entity applying for the grant.

Please specify the number of persons employed within the entity applying for the grant. Please provide the details as requested in the table below. Please note that in the case of private enterprises, only small enterprises within the meaning of Commission Recommendation 2003/361/EC are eligible for funding. Please refer to the Assistance Notes for an explanation of the definition of a small enterprise.

Number of Actual Full Time Employees of On Farm Activity						
	Activity	Males		Female		Total
		Age <25	Age ≥25	Age <25	Age ≥25	
<input type="checkbox"/>	Agri-tourism					
<input type="checkbox"/>	Craft					
<input type="checkbox"/>	Retail					
<input type="checkbox"/>	Renewable energy production					
<input type="checkbox"/>	Other, please specify: _____					

Number of Actual Part Time Employees of On Farm Activity						
	Activity	Males		Female		Total
		Age <25	Age ≥25	Age <25	Age ≥25	
<input type="checkbox"/>	Agri-tourism					
<input type="checkbox"/>	Craft					
<input type="checkbox"/>	Retail					
<input type="checkbox"/>	Renewable energy production					
<input type="checkbox"/>	Other, please specify: _____					

Number of Actual Full Time Employees of Off Farm Activity						
	Activity	Males		Female		Total
		Age <25	Age ≥25	Age <25	Age ≥25	
<input type="checkbox"/>	Agri-tourism					
<input type="checkbox"/>	Craft					
<input type="checkbox"/>	Retail					
<input type="checkbox"/>	Renewable energy production					
<input type="checkbox"/>	Other, please specify: _____					

Number of Actual Part Time Employees of Off Farm Activity						
	Activity	Males		Female		Total
		Age <25	Age ≥25	Age <25	Age ≥25	
<input type="checkbox"/>	Agri-tourism					
<input type="checkbox"/>	Craft					
<input type="checkbox"/>	Retail					
<input type="checkbox"/>	Renewable energy production					
<input type="checkbox"/>	Other, please specify: _____					

Q1.5 Project Leader Details³

Name :

Surname:

Postal Address:

Telephone Number

Mobile Number

Email Address

³ The project leader will be contact person for the Majjistrat Action Group Foundation

Q1.6 Involvement of any other local organisation

Will any organisation other than the applicant be involved in the implementation of the project?

Yes No

If yes, fill in the details below:

Name of Organisation

Contact person

Position within organisation

Phone number

Fax number

Email address

Legal status

- Public Organisation	<input type="checkbox"/>
- Public equivalent	<input type="checkbox"/>
- Non-governmental Organisation	<input type="checkbox"/>
- Other (please specify) _____	

In the box below, please describe the role of the Partners in the project. (Not more than 100 words).

VAT No.

MFSA No.

Q1.7 Institutional framework

In the box below, clearly describe the institutional framework within which the project will be implemented. The Applicant's organisation chart, highlighting which units/sections will be involved in the project should also be inserted.

Q1.8 Project Location

- a. Please indicate the rural location within which the proposed investment will take place:

- b. Do you own the physical infrastructure which will be the focus of the proposed investment?

- Yes
- No

c. In the case that you do not own the physical infrastructure, what title do you have on the project location?

Guardianship Deed Lease

Management Contract

Kindly provide evidence (authenticated copy of leasing contract and/or agreement). It is necessary to also provide a letter from the owner authorising consent for the work to be done.

Q1.9.a Basic information on latest financial accounting details of the entity applying for the grant.

To be completed by private entities only.

	Last Year	Projected Current Year	Forecasted Year 1	Forecasted Year 2
	201__	201__	201__	201__
	€	€	€	€
Annual Turnover⁴				
Sales/Turnover				
Bonuses				
Taxes on sales				
Annual Costs				
Direct Inputs				
Overheads				
Labour Costs				
Rent				
Interest				
Other costs				
Gross Value Added⁵				

Q1.9.b If the applicant is a public entity, the applicant is kindly requested to submit the latest cash flow statement and balance sheet together with projections. If the applicant is a private entity, the applicant is kindly requested to submit the latest audited financial statement of the enterprise together with this application.

⁴ Turnover= Value of Sales/Services minus bonuses given on sales minus taxes on sales

⁵ The Gross Value Added = Annual Turnover - Costs

Q1.10 Co-financing of the Project

Applicable to private entities only:

Please provide information on the corresponding match funding. The applicant, being a private entity, must indicate how the private entity will provide its share of co-financing which amounts to 50% of the total eligible cost of the proposed investment – please tick where applicable:

- Match funding from own financial resources (Please provide adequate evidence to support this statement i.e. declaration from certified auditor confirming that the applicant can match the funding required from own resources and a letter from a commercial bank confirming availability of credit facility);
- Match funding from Bank Loan (please provide copy of sanction letter confirming availability of loan).

In the case of Bank Loan please specify:

Name of bank attaining loan from	
Branch	
Contact Person	
Telephone Number	

Q 1.11a Have you sought any grant aid under Measure 313 in respect to any previous calls under this Measure?

- Yes No

Q 1.11b If yes, have you received any grant aid under Measure 313 in respect to any previous calls under this Measure?

- Yes No

If yes, please provide details:

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Section 2 – Details of the Project

Q 2.1 Project Title

Please provide a title for the proposed project (not more than 10 words)

Q 2.2.a Project scope

Please select which of the following best describes the scope of the investment. Applicant may select more than one heading.

- **The provision of small scale infrastructure for tourism and countryside recreation;**
- **The creation and facilitation of access to areas of high nature, cultural, archaeological, geological and landscape value;**
- **The provision and one-time restoration of small-scale recreational amenities; such as leisure parks, which are tourist attractions;**
- **The setting up of trails that interlink various sites of tourist value;**
- **The development of tourism products based on the rural tourism concept and that promote the traditional character of rural communities;**
- **The development of regional marketing services related to rural tourism including the creation of ICT platforms.**

Q 2.2.b Please list 5 main aims of the project in point form.

-
-
-
-
-

Q2.3 Activity of the investment

Will the investment lead to one or more of the following (please tick where applicable)?

- promotion of economic growth and rural heritage as a tourist product in rural areas;
- varied tourism product offer which results into diversified activities in rural areas;
- enhancement of the rural dimension and the physical setting in which it will be located;
- encouragement of tourism in rural areas that rekindles entrepreneurial activities and generates employment;
- development of tourist services and products that have a direct link with the rural heritage of the areas concerned, that are isolated from the more ‘commercial’ zones, and that are not provided in an ‘artificial’ setting that does not bear a link to the service or product.

Q2.4 Increase in Employment

a. Will the proposed investment result in job retention or creation of new jobs:

- Job retention
- Creation of new jobs

b. If the investment will result in an increase in employment once the project is completed, please indicate in the table below how many people will be employed with the entity applying for the grant on a full time and/or part time basis as a result of the investment:

Number of Full Time Employees Following Completion of On Farm Investment				
	Activity	Age <25	Age ≥25	Total
<input type="checkbox"/>	Agri-tourism			
<input type="checkbox"/>	Craft			
<input type="checkbox"/>	Retail			
<input type="checkbox"/>	Renewable energy production			
<input type="checkbox"/>	Other			

Number of Part Time Employees Following Completion of On Farm Investment				
	Activity	Age <25	Age ≥25	Total
<input type="checkbox"/>	Agri-tourism			
<input type="checkbox"/>	Craft			
<input type="checkbox"/>	Retail			
<input type="checkbox"/>	Renewable energy production			
<input type="checkbox"/>	Other			

Number of Full-time Employees Following Completion of Off Farm Investment				
	Activity	Age <25	Age ≥25	Total
<input type="checkbox"/>	Agri-tourism			
<input type="checkbox"/>	Craft			
<input type="checkbox"/>	Retail			
<input type="checkbox"/>	Renewable energy production			
<input type="checkbox"/>	Other			

Number of Part-time Employees Following Completion of Off Farm Investment				
	Activity	Age <25	Age ≥25	Total
<input type="checkbox"/>	Agri-tourism			
<input type="checkbox"/>	Craft			
<input type="checkbox"/>	Retail			
<input type="checkbox"/>	Renewable energy production			
<input type="checkbox"/>	Other			

Q 2.5 Indicators

Please indicate the current number of tourism related overnight stay and the number of current day visitors to the rural location where the proposed investment will take place. The Applicant must also indicate the forecasted number of tourism related overnight stays and where applicable, the number of tourist visits (day tourists) to the rural area following completion of the project.

Indicator	Last Year 20__	Projected Current Year 20__	Forecasted Year 1	Forecasted Year 2
Number of tourist overnight stay				
Number of tourist visit (day tourist)				

Q 2.6 Project Timetable

- (a) Proposed project start date: _____
- (b) Proposed project completion date: _____
- (c) Duration (in months): _____

Section 3 – Key Investment Plan

Key Investment Plan forms an integral part of the Application Form and ALL Sections have to be completed by the Applicant for such Application to be eligible under this Measure. Should the applicant have any difficulty in compiling Section 3, the applicant may refer to the Assistance Notes for further guidance.

Q 3.1 Project Overview

Please provide a summary of the proposed project describing the type of investment that will be made. The summary must be divided into Scope (including need for the project), Main Activities and Outcome and Results. Explain how the proposed investment is in line with the objectives of this Measure and falls within the Eligibility Actions. View the ‘Assistance Notes’ and ‘Guidance Notes for Measure 313’ for more information with regards to eligible criteria within this Measure.

Scope:

Main Activities:

Outcome and Results:

Q3.2 Background and Justification

In the box below, outline why the project is being undertaken.



Q3.3 Project Cost

a. Project Cost

In the tables below please provide an exhaustive list of the items of the proposed project to be co-financed by this Measure along with the VAT value as indicated. Eligibility costs are to be divided by type of investment as indicated. Please refer to the Application Guidance Notes for assistance. Use additional sheets if necessary. All costs to be provided in Euros.

Table 1 - Small Scale Amenities (Equipment, etc.)						
Column 1	Column 2	Column 3	Column 4	Column 5	Column 6 ⁶	Column 7 ⁷
In this column please specify the investment component relative to the type of investment	Architect's Estimate	Value excluding VAT (€)	VAT Amount (€)	Final Cost including VAT (€)	Applicant's Contribution excluding VAT (€)	Applicant's Contribution including VAT (€)
Total Cost of the component investment						

⁶ This column must be filled in only if the applicant is a private entity. If the applicant is a private entity, the applicant must co-finance 50% of the eligible cost of the proposed investment.

⁷ This column must be filled in only if the applicant is a private entity. If the applicant is a private entity, the applicant must co-finance 50% of the eligible cost of the proposed investment. In this column the applicant must indicate his/her contribution plus the VAT component which must be paid by the applicant.

Table 2 - Recreational Infrastructure (Works, etc.)						
Column 1	Column 2	Column 3	Column 4	Column 5	Column 6⁸	Column 7⁹
In this column please specify the investment component relative to the type of investment	Architect's Estimate	Value excluding VAT (€)	VAT Amount (€)	Final Cost including VAT (€)	Applicant's Contribution excluding VAT (€)	Applicant's Contribution including VAT (€)
Total Cost of the component investment						

b. Overall Total Project Cost

	Value excluding VAT (€)	VAT Amount (18%) (€)	Final Cost including VAT (€)	Applicant's Contribution excluding VAT (€)¹⁰	Applicant's Contribution including VAT (€)¹¹
Total Cost under small scale amenities					
Total Cost under recreational infrastructure					
Total Project Cost					

⁸ This column must be filled in only if the applicant is a private entity. If the applicant is a private entity, the applicant must co-finance 50% of the eligible cost of the proposed investment.

⁹ This column must be filled in only if the applicant is a private entity. If the applicant is a private entity, the applicant must co-finance 50% of the eligible cost of the proposed investment. In this column the applicant must indicate his/her contribution plus the VAT component which must be paid by the applicant.

¹⁰ This column must be filled in only if the applicant is a private entity. If the applicant is a private entity, the applicant must co-finance 50% of the eligible cost of the proposed investment.

¹¹ This column must be filled in only if the applicant is a private entity. If the applicant is a private entity, the applicant must co-finance 50% of the eligible cost of the proposed investment. In this column the applicant must indicate his/her contribution plus the VAT component which must be paid by the applicant.

Q 3.4 Procurement

a) Applicable to Private Entities only:

In the case of infrastructural investment, the applicant must submit a detailed cost estimated prepared and signed by a professional architect. In the case of other type of investment, the applicant must submit three (3) quotations for the expenditure to be incurred.

Have you (the applicant) submitted 3 quotations where required?

Yes

No

If no, please explain why you (the applicant) have not submitted 3 quotations

b) To be filled in by Public Entities (including Local Councils) only

i. Public Procurement Table

State the expected number of tenders and total value of each tender in €. VAT should be quoted separately.

Name of Tender/Call	Type of Tender	Procedure	Estimated Value (€)	VAT (€)	Total (Including VAT) (€)
TOTAL					

ii. Implementation Schedule

In the table below, indicate the stage of the tender/call per quarter.

Please use the following acronyms:

D = Design

T = Tendering & Contracting

I = Implementation

C = Closure

Year	Nth Year*				N+1				N+2			
(please specify the N th year)	201_				201_				201_			
Quarters	1st	2nd	3rd	4th	1st	2nd	3rd	4th	1st	2nd	3rd	4th
Tender/Call 1												
Tender/Call 2												
Tender/Call 3												
Tender/Call 4												
Tender/Call 5												

Note: The Public Contracts Regulations 2005 (and any subsequent amendments) should be consulted in order to establish realistic timeframes.

* N represents the starting year of the project.

iii. Contracting, Disbursement and Payment Claim Schedule

	Year	N th Year*				N+1				N+2				TOTAL
	(please specify the N th year)	201_				201_				201_				
	Quarter	1 st	2 nd	3 rd	4 th	1 st	2 nd	3 rd	4 th	1 st	2 nd	3 rd	4 th	
Total eligible costs (excl VAT) (€)	Contracted													
	Disbursement													
VAT (€)	Contracted													
	Disbursement													
Grand Total (€)	Contracted													
	Disbursement													
Submission of Payment Claim	Eligible cost only													

(a) Has the project gone out to tender?
Yes/No

(b) If yes, has/have the tender(s) been advertised in the Official Journal of the European Communities/Government Gazette?
Yes/No

(c) If the tender(s) has/have been advertised, please indicate:

i. Advertisement number _____

ii. Date (please supply a copy of the advert) _____

(d) If no, please provide details of the tendering arrangements anticipated.

Q3.5 Project Readiness

Please indicate at which stage the project is in the design, tendering process (in the case of public entities), compilation of studies (where applicable), drawing up of EIA (where applicable) and related permits (where applicable).

Q 3.6 Project Sustainability

Describe how the benefits of the project will continue to be delivered after grant support comes to an end. Kindly note that in accordance with Article 72 of Council Regulation 1698/2005 an operation retains the contribution of the funds only if that operation does not, within five years from the completion of the operation undergo a substantial modification (ownership, cessation or relocation constituting such a change).

Q 3.7 Risks and Conditionality

Any conditionality must be specific and achievable, indicating clearly what should be done, by when and by whom. Conditionality not within the control of the applicant is still deemed to be a conditionality on the project and should also be included.

SUMMARY APPLICATION DETAILS

Applicant Name:

Address:

Tel. No:

Mobile No:

Email:

Amount Funding Sought:

For official use only:

Application Date:

Acknowledgement sent:

Pre-inspection Date:

Evaluation Date:

Board Approval Date:

Contract Issue Date:

Contract Signing Date:

Final Inspection Date:

Development Officer:

Funding Approved: €

MAGF System Id Number:

Programme and Measure:

Section 4 Declaration

- I certify that the entries in this form and any other attachments enclosed are, to the best of my knowledge and belief, correct and the grant applied for is the minimum required for the project to proceed as described.
- I can also confirm that I am not aware of any reason why the project may not proceed or be delayed other than those reasons declared and the commitment can be made within the timescales indicated in Q2.6 of Section 2 of this Application Form.
- I allow access to the land/buildings to any authorised person for the purpose of carrying out an inspection in order to verify the accuracy of the information in this application.
- I will notify the LAG in advance of carrying out any changes to the nature or construction of this project.
- I confirm that should I benefit from a grant under this Scheme, I must complete the project in accordance with the terms and conditions stipulated in the Grant Agreement. Should I fail to do so, I will not receive the grant and, if I would have already received any payments from the grant, I would have to reimburse the funds received and interest charges may be applicable.
- I will provide information on the results achieved following implementation of the project and I undertake to provide this information on an annual basis until 2018.
- I will provide any further information as may be required by all stakeholders within the Ministry for Sustainable Development, Environment and Climate Change, Government entities and Majjistral Action Group Foundation (MAGF) that may undertake audit checks and controls.
- I understand that if the application is not complete in all relevant detail and every aspect, including this section, it may be rejected.
- I confirm that the entity submitting this application has not received any other grant for the project being proposed in this application. I confirm that should the entity receive a grant for this project prior to the adjudication of the grant under Measure 313, I will inform the Paying Agency immediately. I am aware that should I receive the grant under Measure 313, I will not be eligible to apply under other grants to obtain additional funding for the same project proposed in this application.

Signature of Project Leader:
Name in Block Capitals:
Date:
Position Held:

Section 5 Supporting Documentation

Q 5.1 Supporting documentation required with regard to the applicant enterprise:

- i. Cash flow statements, projections and balance sheet if the applicant is a public entity;
- ii. Last audited financial statement if the applicant is a private enterprise together with a declaration by certified auditor confirming the applicants availability of own resources to meet the co-financing element;
- iii. Bank Sanction Letter/Bank Letter confirming availability of credit facility – depending on how the applicant (in the case of a private entity) will provide the private co-financing of the investment as indicated in Q1.9 of Section 1 of the Application;
- iv. Recent Memorandum of Association and MFSA Company Registration if the applicant is a private enterprise;
- v. Organigram of the entity applying for the grant clearly indicating the structure within which the project will be implemented (obligatory);
- vi. Copy of VAT Certificate (where applicable);
- vii. Copy of ID card of Project Leader
- viii. Latest Employment Return Form submitted to the Employment and Training Corporation which proves the number of Annual Work Units employed with the entity applying for the grant (obligatory);
- ix. Calculations of annual (operational) costs involved in sustaining the project following the termination of the grant (obligatory);
- x. Proof of Ownership of premises (in the case of owned premises) (obligatory);
- xi. Proof/evidence of building lease/management agreement/guardianship deed (where applicable);
- xii. Owner’s consent (where applicable) – in the case of leased premises;
- xiii. Letter of Intent from partner organisation/s (where applicable);
- xiv. Original signed project application form and supporting documentation together with five copies of all documents and a cd containing a soft copy of all documentation submitted (application should be saved in both word and pdf format).
- xv. In the case where the project leader and the beneficiary are not the same persons, a letter of intent must be provided.

Q 5.2 Supporting documentation required related to proposed investment:

- xvi. In the case of private entities – the applicant must submit at least three quotations or pro-forma invoices for required investment if the proposed project relates to non-infrastructure type of investment;
- xvii. Estimate by architect in case of structural works;
- xviii. Investment Plan (Section 3 of this Application Form);
- xix. Planning permit No. where relevant.
- xx. The Applicant must also submit site plans and approved drawings related to the proposed investment;
- xxi. Feasibility study for projects which exceed €3,000,000 in cost.

PLEASE NOTE:

Part or all of the information you provide will be held on computer. This information will be used for the administration of applications and producing monitoring reports. The Department has the right to share information with other government departments, agencies and implementing bodies to enable them to prevent fraudulent applications or for detecting crime and to co-ordinate processing of complementary applications.

This Application Form along with any attached documents will be treated as confidential throughout and after the project appraisal process. However if your project is selected for an award of grant, to meet EU requirements for transparency regarding the use of EAFRD assistance, the Ministry for Sustainable Development, Environment and Climate Change, and the Majjistral Action Group Foundation (MAGF) has the right to publish the name of the applicant, the amount of grant awarded and a brief summary of the project.

Please return your completed application form along with the necessary documentation by hand to:

Majjistral Action Group Foundation(MAGF)

‘12’

Triq it-Tullier,

Attard. ATD 1631.

Malta.

For official use only:

Acknowledged by:

Date: ____/____/____

EU Database Ref Number: