**Start Up Grant – Application Form**

**When submitting your application, please remember to attach all the required evidence documents, including proof of identification, proof of business address and bank statement. Further details can be found in the guidance document.**

The Welsh Government have launched the Start Up Grant to help new businesses survive the economic consequences of coronavirus (Covid-19).

This fund can grant one-off payments of £2,500 and compliments other Government support measures (such as the Job Retention Scheme to cover ‘furloughed’ employees) for people and business.

You are not eligible for this grant if you are eligible for, or have received:

* The business rate grant from your Local Authority
* Economic resilience fund for SME and microbusinesses
* Self-employment income support scheme through HMRC or Coronavirus Job Retention Scheme

|  |  |  |
| --- | --- | --- |
| I have completed the Business Wales Covid-19 eligibility checker: | **Yes** | **No** |
| My business started trading between 1st April 2019 and 1st March 2020: | **Yes** | **No** |
| My annual / projected annual turnover is under £50k: | **Yes** | **No** |

**SECTION 1 – Your Personal Details**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title | First name | | | Last name | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. | | |
| Address | | | | | | |
| Click or tap here to enter text. | | | | | | |
| Contact telephone number | | | | E-mail address | | |
| Click or tap here to enter text. | | | | Click or tap here to enter text. | | |
| Age | | 16-24 | 25-49 | 50-64 | 65+ | Prefer not to say |
| Please tick | |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Do you consider yourself disabled? | Yes |  | No |  | Prefer not to say |  |
| Do you consider yourself as | Female |  | Male |  | Prefer not to say |  |
| Do you consider yourself to be BME (Black & Minority Ethnic) | Yes |  | No |  | Prefer not to say |  |
| Are you a Welsh speaker | Yes |  | No |  | Prefer not to say |  |

**SECTION 2 – Information about your business**

|  |  |  |
| --- | --- | --- |
| Business name | | Main purpose of business |
| Click or tap here to enter text. | |
| Street | Click or tap here to enter text. | Click or tap here to enter text. |
| Town / City | Click or tap here to enter text. |
| Local Authority | Click or tap here to enter text. |
| Postcode | Click or tap here to enter text. |
| Vat Registration No | |
| Click or tap here to enter text. | |
| HMRC Unique Taxpayer Reference (if applicable) | | Annual / projected annual turnover |
| Click or tap here to enter text. | | Click or tap here to enter text. |
| Number of employees | | Date business started trading |
| Click or tap here to enter text. | | Click or tap here to enter text. |

**Statement of De Minimis Aid received**

Have you received De Minimis Aid during the previous 3 fiscal years (i.e. current fiscal year and the previous two fiscal years):

|  |  |  |
| --- | --- | --- |
| Body providing assistance | Amount £s | Date |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**SECTION 3 – Impact of Covid-19 on your business**

**Please tick the statement that applies to your business:**

My business has suspended business operations

My business is partially trading

Has your turnover reduced by at least 50% since March 2020 as a result of Covid-19? (this will need to be evidenced from bank statements)

Yes No

**Additional information regarding the impact on your business**

|  |
| --- |
| Click or tap here to enter text. |

**SECTION 4 – Your business bank details**

(Please provide a business bank statement as evidence)

|  |  |
| --- | --- |
| **Bank Name** | **Account Name** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **Account Number** | **Sort Code** |
| Click or tap here to enter text. | Click or tap here to enter text. |

**SECTION 5 - Declarations**

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I confirm that I have read and understood the Start Up Grant Guidance document.

I confirm that my business operates in Wales.

I acknowledge that my Local Authority or the Welsh Government will undertake any appropriate business checks considered necessary to assess the application and to check the nature, use and impact of the funding in the future.

I confirm that without the grant the viability of my business will be under threat as a result of the Covid-19 pandemic.

I declare that the information provided in this application is true and accurate.

I confirm that I am not in receipt of the Self Employment Income Support Scheme, Coronavirus Job Retention Scheme, Economic Resilience Fund or the Business Rate Grant.

I confirm that I have provided all required evidence to support my application for the Start Up Grant

I confirm that I will register for Business Wales support if my application for the Start Up Grant is successful

I confirm that I have read and understood the [privacy statement](https://businesswales.gov.wales/privacy-notice-welsh-government-economic-resilience-fund-grants-start-grant) of the Start Up Grant

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