



THE NEF APPLICATION FORM
R250 000 - R75 million
TOURISM TRANSFORMATION FUND



tourism

Department:
Tourism
REPUBLIC OF SOUTH AFRICA



**NATIONAL
EMPOWERMENT
FUND**

Growing Black Economic Participation

THE NEF APPLICATION FORM

R250 000 - R75 million

TOURISM TRANSFORMATION FUND

Complete this application in full with all the required information, **including copies of your** comprehensive business plan and financial projections [refer pages 3-6 for guidelines], incomplete applications will not be assessed. Do not submit master/original copies, all documents submitted, including business plans, will not be returned to applicants, this also applies to declined and withdrawn submissions. **NB: THIS FORM IS FREE AND NO FEES ARE PAYABLE TO THE NEF OR ANY OTHER PERSONS FOR THE COMPLETION OR ASSISTANCE WITH THIS APPLICATION FORM. To view the electronic format please visit: www.nefcorp.co.za**

BUSINESS DETAILS

| | | | | | |
|--------------------------------|--------------------------|--------------------------|--------------------------|------------------------------|--|
| Name of business: | <input type="text"/> | | | Finance required: (Rands) | <input type="text"/> |
| Physical address and province: | <input type="text"/> | | | Stage of business: | Start-up/new: <input type="checkbox"/> |
| Postal address: | <input type="text"/> | | | | Existing: <input type="checkbox"/> |
| | <input type="text"/> | | | | Years in existence: <input type="checkbox"/> |
| Business tel. number: | <input type="text"/> | | | | |
| Business fax. number: | <input type="text"/> | | | Type of industry: | <input type="text"/> |
| | Rural | Urban | Peri-Urban | Key contact person: | <input type="text"/> |
| Business Location: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Key contact person's number: | <input type="text"/> |
| | | | | Email address: | <input type="text"/> |

APPLICANTS DETAILS

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------|---|--|--|--|--|--|--|--|--|--|--------------------|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|--|--|----|-----|------|--|--|--|--|
| Name: | | | | | | | | | | | Surname: | | | | | | | | | | | Mr | Mrs | Miss | | | | |
| Identity number: | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cellphone: | | | | | | | | | | | BEE classification | A | <input type="checkbox"/> | C | <input type="checkbox"/> | I | <input type="checkbox"/> | W | <input type="checkbox"/> | | | | | | | | | |
| Email address: | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------|---|--|--|--|--|--|--|--|--|--|--------------------|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|--|--|----|-----|------|--|--|--|--|
| Name: | | | | | | | | | | | Surname: | | | | | | | | | | | Mr | Mrs | Miss | | | | |
| Identity number: | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cellphone: | | | | | | | | | | | BEE classification | A | <input type="checkbox"/> | C | <input type="checkbox"/> | I | <input type="checkbox"/> | W | <input type="checkbox"/> | | | | | | | | | |
| Email address: | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|------------------|---|--|--|--|--|--|--|--|--|--|--------------------|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|--|--|----|-----|------|--|--|--|--|
| Name: | | | | | | | | | | | Surname: | | | | | | | | | | | Mr | Mrs | Miss | | | | |
| Identity number: | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cellphone: | | | | | | | | | | | BEE classification | A | <input type="checkbox"/> | C | <input type="checkbox"/> | I | <input type="checkbox"/> | W | <input type="checkbox"/> | | | | | | | | | |
| Email address: | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |

DIRECTORS/MEMBERS INTEREST

| Name | *BEE/Non-BEE | Male/Female | Contribution | Shareholding % (Pre-NEF funding) | Shareholding % (Post-NEF funding) |
|--------------|--------------|-------------|--------------|-------------------------------------|--------------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| TOTAL | | | | | |

* "Black people" are, African, Coloured and Indian natural persons who are citizens of the Republic of South Africa by birth or by descent as well as natural persons who acquired citizenship by naturalisation prior to 27 April 1994.

FOR OFFICE USE ONLY

| | | | | | | | | | | |
|-------------------------------|--------------------------|--------------------------|---------------------------------|--------------------------|---------------------|--------------------------|---|---|--------------|--------------------------|
| Date of original application: | D | D | M | M | Y | Y | Y | Y | Resubmission | <input type="checkbox"/> |
| Reference number: | | | | | | | | | | |
| Product type: | Entrepreneurship finance | <input type="checkbox"/> | Franchise finance | <input type="checkbox"/> | Acquisition finance | <input type="checkbox"/> | | | | |
| | Procurement finance | <input type="checkbox"/> | Rural and community development | <input type="checkbox"/> | New ventures | <input type="checkbox"/> | | | | |
| | Expansion capital | <input type="checkbox"/> | Strategic project fund | <input type="checkbox"/> | | | | | | |

The NEF will not consider applications that do not comply with all current RSA legislation pertaining to the operations of a business, including but not limited to, all tax and corporate governance laws/principles. Where appropriate the NEF may report such cases to the relevant authorities.

| OPERATING ENTITY: | | Accounting Officer: | | CURRENT REGISTRATIONS | |
|---------------------------------------|------------------------------|---------------------|-----|--------------------------|----|
| Company: | <input type="checkbox"/> | (indicate by X) | Yes | <input type="checkbox"/> | No |
| Reg no: | <input type="text"/> | VAT | Yes | <input type="checkbox"/> | No |
| Close Corporation: | <input type="checkbox"/> | RSC | Yes | <input type="checkbox"/> | No |
| Reg no: | <input type="text"/> | UIF | Yes | <input type="checkbox"/> | No |
| Other: | <input type="checkbox"/> | PAYE | Yes | <input type="checkbox"/> | No |
| Please elaborate: | <input type="text"/> | INCOME TAX | Yes | <input type="checkbox"/> | No |
| | <input type="text"/> | CONTACTABLE | | | |
| Purpose of Finance: (<i>Rands</i>): | <input type="checkbox"/> | BUSINESS | | | |
| Business acquisition: | <input type="checkbox"/> | REFERENCES: | | | |
| Asset acquisition: | <input type="checkbox"/> | 1. Name: | | | |
| Working capital: | <input type="checkbox"/> | Telephone: | | | |
| Start-up: (Additional set-up costs) | <input type="checkbox"/> | 2. Name: | | | |
| Bridging finance: | <input type="checkbox"/> | Telephone: | | | |
| Total Funding Requested | <input type="checkbox"/> | 3. Name: | | | |
| | <input type="checkbox"/> | Telephone: | | | |
| AVAILABILITY OF THE FOLLOWING: | | | | | |
| (Indicate by X) | | | | | |
| Own contribution | Yes <input type="checkbox"/> | | | | |
| | No <input type="checkbox"/> | | | | |
| | <input type="text"/> | | | | |
| Source | <input type="text"/> | | | | |

DECLARATION AND CONSENT

To be signed by all applicants

INDEMNITY BY APPLICANT

I/we the applicant as detailed below declare that the information provided in this document is a true and correct reflection of the facts, and I/we consent to a background verification of such information.

I furthermore authorise KreditInform (Pty) Ltd. to conduct all background checks including but not limited to credit bureau searches, employment history, and any other relevant checks in the pre- or post-investment vetting process and where necessary to request the South African Police Services, Tertiary Education Institutions to furnish personal information regarding my criminal background, criminal history, previous convictions and / or any other relevant information such as is usually furnished by the Criminal Record Centre of the South African Police Services, and or Tertiary Education Institutions in this regard, to the above agency / the NEF's duly authorised agent.

I furthermore unconditionally indemnify the South African Police Services, The NEF, Tertiary Education Institutions and all it's members, employees as well as the Government of the Republic of South Africa against any liability which results or may result from furnishing information in this regard.

I understand that it is a condition of the South African Police Services and Tertiary Education Institutions, that -

- (b) the NEF's duly authorised agent is responsible for verifying the accuracy, in every respect, of the information furnished by the South African Police Services.

Please confirm if we can share your information with other DFI's or Gov. agencies for the possibilities of accessing their funding or non-funding (boxes for Y/N)

Tick applicable box

| | | | | | |
|-----------|-----------|-----------|------|-----|---------|
| Full name | Signed at | Signature | Date | BEE | Non-BEE |
| Full name | Signed at | Signature | Date | BEE | Non-BEE |
| Full name | Signed at | Signature | Date | BEE | Non-BEE |
| Full name | Signed at | Signature | Date | BEE | Non-BEE |

DOCUMENT AND INFORMATION CHECKLIST

Please provide us with the applicable documents as outlined below;
Where the information requested is not applicable please write "not applicable" or "n/a"

| | | Existing Business | Start-up Business |
|----|---|-------------------|-------------------|
| 1 | Application form and Business plan | • | • |
| 2 | Affidavit from members or directors that they are aware of the contents of the application form | • | |
| 3 | Three (3) year audited financials (Income Statement, Balance Sheet, Cash Flow Statement) | • | |
| 4 | Five (5) year financial projections (Income Statement, Balance Sheet and monthly Cash Flow Statement) with first year prepared on a monthly basis | • | • |
| 5 | Recent management accounts (Income Statement and Balance Sheet) | • | |
| 6 | Personal Statements of Assets and Liabilities of all the members or directors including those of spouses if person is married in Community of Property | • | • |
| 7 | Business bank statements for the past twelve (12) months | • | |
| 8 | Certified ID copies of all members or directors | • | • |
| 9 | Registration Documents and all the relevant legal documents relevant to the entity | • | • |
| 10 | Detailed profile of the Franchisor | • | • |
| 11 | Details of why the business is for sale | • | |
| 12 | Sale Agreement | • | |
| 13 | Franchise Agreement | • | • |
| 14 | Historical financials of other franchises that are similar in size and in similar locations | • | • |
| 15 | Indication from the Franchisor of how much a new Franchise in a similar location would cost | • | • |
| 16 | Indication of whether the lease agreement will be ceded to the new company after the sale or a new lease agreement will be signed If lease is ceded, how long will it still run for before renewal? New lease if it is a new franchise. | • | • |
| 17 | The prospective buyer must have been approved by the franchisor | • | |
| 18 | Fica compliance - Proof of residence | • | • |
| 19 | Detailed CV of principle Applicant | • | • |

NB:

- AN APPLICATION WILL BE REJECTED IF YOU DO NOT SUBMIT ALL THE DOCUMENTS AS PER THE ABOVE LIST AND GUIDELINES.
- PROVIDE ALL OTHER DOCUMENTS RELEVANT TO YOUR BUSINESS NOT LISTED ABOVE.
- OUR APPLICATION PROCESS IS APPROXIMATELY 3 TO 4 MONTHS FROM THE RECEIPT OF THE APPLICATION UP TO DISBURSEMENT STAGE.

BUSINESS PLAN GUIDELINES AND INFORMATION CHECKLIST

PLEASE NOTE THAT THIS SECTION ONLY PROVIDES GUIDELINES TO ASSIST YOU WITH COMPILING A BUSINESS PLAN THAT MEETS THE NEF'S MINIMUM INFORMATION REQUIREMENTS AND DOES NOT REQUIRE ALL SUBMISSIONS TO FOLLOW THIS FORMAT. ALL OTHER BUSINESS PLANS WILL BE ACCEPTED PROVIDED ALL THIS INFORMATION HAS BEEN SUFFICIENTLY COVERED IN THOSE PROPOSALS.

1. Executive Summary

Provide a brief description of the business, the reason the funding is required, background on the promoters, and an overview of the socio-economic benefits.

2. Purpose of required funding

Motivate why capital is required and provide details of how these funds will be applied.

3. Valuation of Business

If funds are to be used for the purchase of an existing business, please provide details of how business valuation has been derived, eg, DCF, NAV, price-earnings.

4. Products and Services

Describe the product and/or service offering by including the following:

- Benefits to the user
- Specifications of products/services
- Unique selling proposition
- Product mix
- Source of revenue/contractual revenue
- Product life cycle
- Potential and proposed new product developments
- Export potential

5. Industry analysis

Provide information on industry by including the following:

- Summary of the industry
- Value drivers and industry price structures
- Historical growth rates
- Trends and problems the industry is facing
- Recent developments
- How is the market segmented and why
- Applicable industry ratios
- Legal and regulatory environment
- Economic outlook
- Growth constraints
- Growth opportunities
- Cyclicalities and seasonality
- Industry specific risks

6. Target market analysis

Provide information on customers by including the following:

- Market analysis (size and growth in terms of number of products, money value and number of customers)
- Target Market and geographic coverage
- List of existing and potential customers
- Letters of intent, contracts and orders on hand
- Bargaining power of customers
- Growth opportunities i.e. new products/new customers
- Distribution channels

7. Competitor analysis

Provide information on competitors, by including the following:

- Market share
- Barriers to entry and new entrants
- Substitute products
- Details of marketing budget
- Marketing strategy to realise objectives

8. Supplier analysis

Provide information on suppliers by including the following:

- Number of suppliers

- Bargaining power of suppliers
- Availability of raw materials
- Cost of imported vs local materials
- Rand/Dollar exchange rate (where applicable)

9. Operational analysis

Provide information on operations by including the following:

- Production processes
- Equipment required
- Plant capacity and utilisation
- Production costs
- Replacement requirements
- New technology requirements
- Quality control/reject rate
- Raw materials required

10. Management and Human Resources

Provide information on management and HR by including the following:

- Management experience and qualifications
- Number of employees
- % BEE • Skills required
- Training programmes
- Staff turnover

11. Summary of all internal and external risks

Provide a summary of information on the principle risks that the entity is subject to and how these risks will be addressed.

12. Socio-economic benefits

Provide information on socio-economic benefits by including the following:

- Job creation
- Poverty alleviation
- Women participation
- Skills transfer/training
- Industrial growth and development
- Number of households to benefit

13. Financial/cash flow analysis

See attached templates for layout of financial statements:

- Please provide income statement, balance sheet and cash-flow statements and state assumptions used in projections
 - Financials should reflect: 3 years historic information for existing entities plus 5 year forecasts
 - Please provide the most recent management accounts if the business is already in existence
 - The first year of financial forecasts must be broken down month by month
- Please include commentary on the financials to date and the forecasts, as well as:

- Break-even analysis
- Specify value drivers for base, best vs worse case scenario
- Cash flow cycle, seasonal, monthly, credit days, debtors days, stock days
- Profit margins
- Profitability
- Key assumptions used in compiling cash flow forecasts
- Cost drivers (What proportion is fixed)
- Debt structure
- Working capital review/analysis
- Fixed assets profile For Start-ups please attach a five-year forecast, analysis as stated above but emphasis should be on motivating why forecasts on sales are achievable and costs are reasonable.

INCOME STATEMENT TEMPLATE (Please also provide year-1 forecasts month by month)

| | HISTORICAL | | | PROJECTED/FORECAST | | | | |
|------------------------------|------------|--------|--------|--------------------|--------|--------|--------|--------|
| | Year-3 | Year-2 | Year-1 | Year-1 | Year-2 | Year-3 | Year-4 | Year-5 |
| Sales in units | | | | | | | | |
| Sales in Rands | | | | | | | | |
| Less: Cost of sales | | | | | | | | |
| Raw material a | | | | | | | | |
| Raw material b | | | | | | | | |
| Direct labour | | | | | | | | |
| Gross profit | | | | | | | | |
| Less: Operating expenses | | | | | | | | |
| Accounting and auditing fees | | | | | | | | |
| Advertising | | | | | | | | |
| Depreciation | | | | | | | | |
| Distribution cost | | | | | | | | |
| Equipment leases | | | | | | | | |
| Insurance | | | | | | | | |
| Interest | | | | | | | | |
| Motor vehicle expenses | | | | | | | | |
| Office expenses | | | | | | | | |
| Other expenses | | | | | | | | |
| Printing and stationery | | | | | | | | |
| Rental, electricity, water | | | | | | | | |
| Salaries and wages | | | | | | | | |
| Directors' salaries | | | | | | | | |
| Security costs | | | | | | | | |
| Telephone | | | | | | | | |
| Income/(loss) before tax | | | | | | | | |
| Income tax | | | | | | | | |
| Income/(loss) after tax | | | | | | | | |

BALANCE SHEET TEMPLATE

| | HISTORICAL | | | PROJECTED/FORECAST | | | | |
|---------------------------------|------------|--------|--------|--------------------|--------|--------|--------|--------|
| | Year-3 | Year-2 | Year-1 | Year-1 | Year-2 | Year-3 | Year-4 | Year-5 |
| ASSETS | | | | | | | | |
| Fixed assets | | | | | | | | |
| Land and buildings | | | | | | | | |
| Motor vehicles | | | | | | | | |
| Furniture and fitting | | | | | | | | |
| Machinery and equipment | | | | | | | | |
| Other | | | | | | | | |
| Current assets | | | | | | | | |
| Debtors | | | | | | | | |
| Stock | | | | | | | | |
| Cash surplus/(deficit) | | | | | | | | |
| Total assets | | | | | | | | |
| EQUITIES AND LIABILITIES | | | | | | | | |
| Capital and reserves | | | | | | | | |
| Share capital | | | | | | | | |
| Shareholders' loan | | | | | | | | |
| Retained income | | | | | | | | |

BALANCE SHEET TEMPLATE (continued)

| | HISTORICAL | | | PROJECTED/FORECAST | | | | |
|------------------------------|------------|--------|--------|--------------------|--------|--------|--------|--------|
| | Year-3 | Year-2 | Year-1 | Year-1 | Year-2 | Year-3 | Year-4 | Year-5 |
| Non-current liabilities | | | | | | | | |
| Term loan | | | | | | | | |
| Other loan | | | | | | | | |
| Current liabilities | | | | | | | | |
| Creditors | | | | | | | | |
| Bank overdraft loan | | | | | | | | |
| Total equity and liabilities | | | | | | | | |
| Debtors' days | | | | | | | | |
| Creditors' days | | | | | | | | |

CASH FLOW STATEMENT TEMPLATE (Please also provide year-1 forecasts month by month)

| CASH FLOWS | HISTORICAL | | | PROJECTED/FORECAST | | | | |
|--|------------|--------|--------|--------------------|--------|--------|--------|--------|
| | Year-3 | Year-2 | Year-1 | Year-1 | Year-2 | Year-3 | Year-4 | Year-5 |
| FROM OPERATING ACTIVITIES | | | | | | | | |
| Net profit before taxation | | | | | | | | |
| Adjustments for: | | | | | | | | |
| Depreciation, amortisation | | | | | | | | |
| Interest paid | | | | | | | | |
| Interest received | | | | | | | | |
| (Increase)/decrease in debtors | | | | | | | | |
| Increase/(decrease) in creditors | | | | | | | | |
| (Increase)/decrease in stock | | | | | | | | |
| Cash generated from operations | | | | | | | | |
| Interest paid | | | | | | | | |
| Dividends paid | | | | | | | | |
| Preference dividends (paid) | | | | | | | | |
| Income taxes paid | | | | | | | | |
| Net cash from operating activities | | | | | | | | |
| CASH FLOWS FROM OPERATING ACTIVITIES | | | | | | | | |
| Capital expenditure | | | | | | | | |
| Interest received | | | | | | | | |
| Net cash used in investing activities | | | | | | | | |
| CASH FLOWS FROM FINANCING ACTIVITIES | | | | | | | | |
| Proceeds on issue of shares | | | | | | | | |
| Proceeds on disposal of fixed assets | | | | | | | | |
| Holding company loan | | | | | | | | |
| Preference shares | | | | | | | | |
| Nedbank long-term loan | | | | | | | | |
| Net cash used in investing activities | | | | | | | | |
| Net change in cash | | | | | | | | |
| Cash equivalent at beginning of period | | | | | | | | |
| Cash equivalent at end of period | | | | | | | | |
| RATIOS | | | | | | | | |
| Gross margin | | | | | | | | |
| Net margin | | | | | | | | |
| Current ratio | | | | | | | | |
| Debtors’ days | | | | | | | | |
| Creditors’ days | | | | | | | | |
| Stock days | | | | | | | | |
| Debt to equity ratio | | | | | | | | |
| Interest cover | | | | | | | | |

HOW TO REACH THE NATIONAL EMPOWERMENT FUND

Gauteng Province

Head Office

West Block, 187 Rivonia Road, Morningside 2057, PO Box 31, Melrose Arch, Melrose North 2076
Tel: +27 (11) 305 8000 | Fax: +27 (11) 305 8001 | Call Centre: 0861 843 633 | 0861 (THE NEF)
applications@nefcorp.co.za (Funding) | info@nefcorp.co.za (General Enquiries)

Eastern Cape Province

7b Derby Road, Berea, East London 5241 | Tel: (043) 783 4200 | 0861 NEF ECP (0861 633 327)
Fax: 0861 ECP NEF (0861 327 633) | easterncape@nefcorp.co.za

Free State Province

133 Bloem Plaza, Charles St, Bloemfontein Central, 9300
Tel: (051) 407 6360 | 0861 NEF FSP (0861 633 377) | Fax: 0861 FSP NEF (0861 377 633)
freestate@nefcorp.co.za

KwaZulu-Natal Province

4th Floor (South Side), Grindrod Bank Building, 5 Arundel Close, Kingsmead Office Park,
Durban | Tel: (031) 301 1960 | 0861 NEF KZN (0861 633 596) | Fax: 0861 KZN NEF (0861 596 633)
kzn@nefcorp.co.za

Limpopo Province

Suite 8, Biccard Park, 43 Biccard Street, Polokwane 0699 | Tel: (015) 294 9200 | 0861 NEF LIM (0861 633 546)
Fax: 0861 LIM NEF (0861 546 633) | limpopo@nefcorp.co.za

Mpumalanga Province

13 Ferreira Street, Maxxa Building, 2nd floor, Nelspruit | Tel: (013) 754 9860 | 0861 NEF MPU (0861 633 678)
Fax: 0861 MPU NEF (0861 678 633) | mpumalanga@nefcorp.co.za

Northern Cape Province

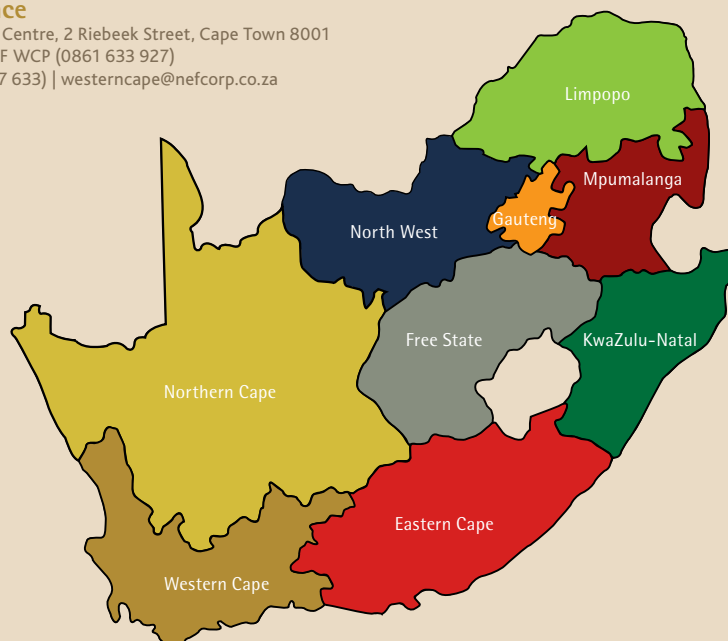
Block Three, Ground Floor, The Montrie Corporate Park, 10 Oliver Road, Monument Heights, Kimberley
Tel: (053) 831 1152 | 0861 NEF NCP (0861 633 627) | Fax: 0861 NCP NEF (0861 627 633) | northerncape@nefcorp.co.za

North West Province

32B Heystek Street, Sunetco Office Park, Ground Floor, Rustenburg, 0299 | Tel: (014) 523 9220
0861 NEF NWP (0861 633 697) | Fax: 0861 NWP NEF (0861 697 633) | northwest@nefcorp.co.za

Western Cape Province

Suite 2404, 24th Floor, ABSA Centre, 2 Riebeeck Street, Cape Town 8001
Tel: (021) 431 4760 | 0861 NEF WCP (0861 633 927)
Fax: 0861 WCP NEF (0861 927 633) | westerncape@nefcorp.co.za



STOP Fraud, Corruption and Theft

Contact Tip-Offs Anonymous on 0800 212 705 or email nef@tip-offs.com
If you suspect any irregularity in the application process



National Empowerment Fund Trust (established by Act 105 of 1998) IT: 10145/00.
A member of the dtic group | www.nefcorp.co.za