



## CONTANERIZED RETAIL SHOPS FOR RENTAL

The Steve Tshwete Local Municipality invites interested and qualifying township businesses to apply to occupy the containerized retail shops currently being constructed in Mhluzi, extension 4, next to eMhluzi Mall.

Informal businesses are encouraged to apply. Preferences will be given to people living with disabilities, youth and women- owned businesses, trading in the following services:

<b>Bakery and confectionery</b>
<b>Water, Juice and Milk</b>
<b>Salon and Barber</b>
<b>Arts and Craft</b>
<b>Mini food restaurant [Fast-food or African cuisine]</b>
<b>Maize and basic commodities outlet</b>
<b>Hawkers or street vendor</b>

Application forms with all requirements should be collected at the LED office or downloaded on the SMME Portal <https://smmeportal.online/> from 01 March 2023.

**CLOSING DATE 30 MARCH 2023, 12H00.**

Enquiries can be directed to the LED office, Assistant Director **Mr Michael Nkosi (013) 249 7153** or **(013) 283 6856**.

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**MUNICIPAL MANAGER  
SM MNGUNI**

**Date Initiated: 28 February 2023**





LOCAL ECONOMIC DEVELOPMENT UNIT

COMPANY DETAILS

1. BUSINESS NAME..... 2. REG NO. ....

3. SARS TAX NUMBER..... 4. BUSINESS SECTOR/INDUSTRY.....

5. TYPE OF BUSINESS ENTITY:  CLOSE CORPORATION [CC]  PRIVATE COMPANY [PTY. LTD]  
 UNREGISTERED

6. B-BBEE STATUS: BLACK OWNERSHIP \_\_\_\_% BLACK FEMALE OWNERSHIP \_\_\_\_%  
BLACK YOUTH OWNERSHIP \_\_\_\_%

7. BUSINESS ADDRESS: .....  
.....  
.....  
.....  
.....

8. BUSINESS CONTACT: ..... 9. BUSINESS EMAIL: .....

10. DESCRIBE YOUR BUSINESS PRODUCTS/SERVICES? .....  
.....  
.....  
.....  
.....

11. HOW LONG HAS THE BUSINESS BEEN IN OPERATION:  < LESS THAN A YEAR  > MORE THAN 1 YEAR  
 MORE THAN 3 YEARS

12. HOW MANY PEOPLE ARE WORKING IN YOUR BUSINESS (EXCLUDING YOURSELF)? .....

13. INDICATE AVERAGE MONTHLY TURNOVER OF THE BUSINESS:

R10 000 – R20 000  R20 000 – R35 000  R35 000- R50 000  MORE THAN R50 000

**14. DIRECTOR DETAILS**

FIRST NAME (S): ..... SURNAME: .....

DATE OF BIRTH: ..... GENDER: .....

CELL NUMBER: ..... EMAIL: .....

PHYSICAL ADDRESS: .....  
.....  
.....  
.....

15. LIVING WITH DISABILITY: YES  NO

16. HISTORICALLY DISADVANTAGED GROUP: YES  NO

**17. SUPPORTING DOCUMENTS**

- CK CERTIFICATE (CIPC) OR PERMIT – Compulsory
- TAX CLEARANCE OR PERMIT – Compulsory
- CERTIFIED ID COPY OF DIRECTOR (s) – Compulsory
- DIRECTORS PROOF OF RESIDENCE (NOT OLDER THAN 3 MONTHS) - Compulsory
- LATEST ANNUAL FINANCIAL STATEMENTS / BUSINESS BANK STATEMENTS (12 MONTHS) – Optional
- BUSINESS PLAN OR PROPOSAL– Optional
- BUSINESS CONTRACTS – Optional
- MUNICIPAL ACCOUNTS STATEMENT (NOT OLDER THAN 3 MONTHS) - Compulsory

APPLICATIONS NEED TO BE SUBMITTED AT THE MUNICIPAL BUILDING, 1<sup>ST</sup> FLOOR, OFFICE B207 BY **30 March 2023 by 12H00.**

THE MUNICIPALITY RESERVES THE RIGHT TO ENTER OR NOT ENTER INTO A LEASE AGREEMENT WITH ANY APPLICANT/BUSINESS. SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE ALLOCATION OF A WORKSHOP.

THIS APPLICATION IS HEREBY SUBMITTED BY:

NAME: ..... SIGNATURE: .....

DATE: .....

