

BML STARTUP GRANT

Application Form

IMPORTANT INFORMATION

The BML Startup Grant is an Entrepreneurship Program aiming to foster emerging entrepreneurs to explore new business ideas, new business start-ups or bring to scale a business targeting enterprises in the Maldives. The contestants will be required to present business ideas in the form of a business plan in addition to the application form.

Eligibility Criteria

- Maldivians aged between 18 to 60 with new business ideas can apply individually or jointly.
- Should not be a registered business for over 12 months.
- All individual applicants and businesses must be credit worthy customers of Bank of Maldives.
- Government bodies, business entities and other institutions that are state funded are not eligible.
- Employees of Bank of Maldives and their immediate family members are not eligible.
- PEPs and persons holding prominent positions in the government are not eligible.
- All individuals and businesses can submit only one application.

SECTION 1 - INDIVIDUALS

Applicant Name

ID Card No.

Date of Birth

Present Address

House/Building Name

Street Name

Flat/Floor

District, Atoll, Island

Post Code

Country

Phone No.

Email

SECTION 1A - BANKING DETAILS

Primary Bank

Account Number

Currency

 MVR USD

SIGNATURE: _____

SECTION 2 - FOR BUSINESSES

Business Name

Registration No.

Registration Date

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Type of Business

Private Limited Company

Sole Trader

Partnership

Others, please specify _____

Registered Address

House/Building Name

Street Name

Flat/Floor

District, Atoll, Island

Post Code

Country

Present Business Address

House/Building Name

Street Name

Flat/Floor

District, Atoll, Island

Post Code

Country

Phone No.

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Email

Main Lines of Business

Total Investment

SECTION 2A - BANKING DETAILS

Primary Bank

Account Number

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Currency

MVR

USD

SECTION 3 - STARTUP DETAILS

Startup Name

Contact Person

Phone No.

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Email

Amount Required (MVR)

Business sector

Consumer Goods and Services

FinTech

Healthcare

Educational Technology

B2B Software and Services

Others, please specify _____

SIGNATURE: _____

DECLARATION

By sending this application form to startupgrant@bml.com.mv you agree:

- That the information and documents presented may be verified by Bank's employees having appropriate authority.
- That the details above are true and correct to the best of your knowledge and belief and you undertake to inform the Bank of any changes therein, immediately.
- That you have read the Terms and Conditions of the BML Startup Grant (as listed on BML website) and agree to abide by it.
- That in case any of the above information is found to be false, untrue, misleading or misrepresenting, the application will be rejected.

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Date

For Individuals

Name

ID Card No.

Signature

1. _____

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2. _____

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3. _____

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4. _____

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5. _____

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6. _____

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For Businesses

_____ Name

_____ Designation

_____ Signature

Company Seal

SIGNATURE: _____

LIST OF DOCUMENTS TO BE PROVIDED WITH THE APPLICATION

	Document Name	Tick if Submitted
INDIVIDUAL		
	Completed Startup Grant Application Form	<input type="checkbox"/>
	Business Plan	<input type="checkbox"/>
	ID card copy (for individual applicants)	<input type="checkbox"/>
BUSINESSES & PARTNERSHIPS		
	Completed Startup Grant Application Form	<input type="checkbox"/>
	Business Plan	<input type="checkbox"/>
	Business registration certificate	<input type="checkbox"/>
	Business Profile sheet	<input type="checkbox"/>
	ID card copy of all Directors/Shareholders	<input type="checkbox"/>

SIGNATURE: _____

