#### Expression of Interest Form

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| --- | --- |
| Sub-project title |  |
| Applicant  |  |
| Legal Representative of the Entity  | Name and signature  |

Skopje

2017

EXPRESSION OF INTEREST APPLICATION LETTER

*Objective of the call:*

 *Date:*

To: Project Implementation Unit-LRCP

Having examined the Request for Expression of Interest and Instructions for submission of the **Investment in tourism-related infrastructure and linkages at destinations grants** under LRCP, we would like to submit with this letter our Expression of Interest proposal to LRCP:

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| --- |
| Sub-project Proposal title: |
| Requested sub-grant amount by LRCP: |  |
| Co-financing amount by the applicant: |  |
| Total sub-project amount: |  |

Should our proposal be selected, we are committed to develop the full sub-project proposal in adherence to the proposed contents set forth in this call for expression of interest. We also agree to submit all needed documentation in hard copy and/or in electronic copy as required for submitting the full sub-project proposal.

We, the undersigned, certify that to the best of our knowledge and belief, all information and documentation contained in this expression of interest is true and correct. We also certify that the proposed sub-project is not receiving funding from other sources for the same activities proposed in this Expression of Interest.

**Applicant Representative**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Head of Entity/Lead Coordinator Signature

### Expression of Interest Form

Section 1: The Applicant

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| Basic information about the applicant |
|  | Sub-project number LRCP only |
| 1. | **Full Legal Name of Applicant**(As per registration certificate ) |  |
| 2. | Full Name of Applicant (the entity) |  |
| 3. | Name of legal representative: |  |
| 4. | Address: |  |
| 5. | Contact details:  | Tel. | Fax. | Mob.  | e-mail  |
| 6. | Web page:  |  |
| 7. | Date of issuance of business registration/establishment decision |  |
| 8. | Legal status of the entity |  |
| 9. | Registration Number |  |
| 10. | TAX ID Number  |  |
| 11. | Primary sectors of the entity’s operation |  |
| 12. | Applicant Sub-project Coordinator: | Name and position  |
| 10. | Contact details: | Tel. | Fax. | Mob. | e-mail |
| Table 1. Basic information about the applicant |

To be filled, only in case of partnership:

Partner 1

|  |
| --- |
| Basic information about the partner  |
|  |
| 1. | Legal name of the entity |  |
| 2. | Type of the institution  |  |
| 3. | Name of legal representative |  |
| 4. | Address |  |
| 5. | Web page of the institution |  |
| 6. | Contact details  | Tel. | Fax. | Mob. | e-mail |
| 7. | Registration Number |  |
| 8. | TAX ID Number  |  |
| 9. | Field of work  |  |
| 10. | Date of issuance of business registration/establishment decision |  |
|  |
| Table 2. Basic information about the partner |

Partner 2

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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| Basic information about the partner 2 |
|  |
| 1. | Legal Name of the entity |  |
| 2. | Type of the institution  |  |
| 3. | Name of legal representative |  |
| 4. | Address |  |
| 5. | Web page of the institution |  |
| 6. | Contact details  | Tel. | Fax. | Mob. | e-mail |
| 7. | Registration Number |  |
| 8.. | TAX ID Number  |  |
| 9. | Field of work  |  |
| 10. | Date of issuance of business registration/establishment decision |  |
|  |
|  Table 3. Basic information about the partner 2 |

 |

**Please select the type of sub-project you are applying for:**

[ ] Infrastructure Investments/Branding and promotion

[ ]  Grants for enhanced tourism service-delivery and local economic impact

[ ] Matching grants for local micro and small sized enterprises to enhance business linkages and innovation for destinations competitiveness

**Section 2 – Expression of Interest (EOI)**

Submitting an Expression of Interest (EOI) is the first phase in the sub-grant selection process. The EOI should clearly and concisely explain the proposed sub-grant activity’s relevance, purpose, objectives, activities and expected results in support of filling the gaps from the Development Plans that are objectives of the LRCP as set forth in this call. After evaluating EOIs, the LRCP PIU will invite eligible applicants to enter into a second phase of the competition by submitting a full sub-project application based on the concepts and technical approaches proposed in the EOI. All EOIs must not exceed 5 pages and must be submitted in the following format:

**1. Proposed Grant Activity Details**

|  |
| --- |
| Sub-project Proposal |
|  |
|  | Sub-project Title: | Budget |
|  |  | Amount  |      % |
| I | Total Budget of the Sub-project  |       | 100% |
|  |  |  |  |
| II | Requested amount from LRCP |       |       |
|  |  |  |  |
| III. | Applicants contribution (please state clearly cash or in-kind): |       |       |
| 1. |  Own contribution |       |       |
| 2. |  Partner 1 contribution |       |       |
| 3. |  Partner 2 contribution |       |       |
| 4. |  Other      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |       |       |
|  | Total duration of the proposed sub-project |  Months |
| Table 4. Sub-project Proposal |

**2. Sub-Project Description and Problem Statement**

Please describe the proposed sub-grant activity and the main problems/issues that it will address. Please state which destination or destinations the proposed sub-project is targeting. (max. 300 words)

**3. Relevance of the proposed sub-project to the Objectives of the LRCP**

Please explain how your proposed sub-grant proposal is in line with the objectives of the Local and Regional Competitiveness Project as set forth in the Call for Proposals. You should clearly explain which gap or gaps from the Development Plans the proposed sub-project is addressing and how the proposed sub-project plans to address the gap. (max. 200 words)

**4. Sub-Project's Goal and Objectives**

Please state the overall goal and specific objectives of the proposed sub-project and briefly describe the expected results. (max. 500 words)

**5. Proposed Activities and results**

Please list and briefly describe the illustrative activities that your entity proposes to undertake to meet the objectives of the proposed sub-project proposals.

|  |
| --- |
| Activities and results |
| Description of activity | Duration | Estimated Budget |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Table 5. Activities and results |

**6. Sub-project partners:**

List all partners participating in this sub-project, indicating the nature of their participation e.g. Financial, in-kind, or other (specify). Describe how strategic partnering in this sub-project will add value to the sub-proposal.

**7. Appendices**

**APPENDIX 1:** Please attach a copy of your Registration certificate from Central Registry of the Republic of Macedonia not older than 6 months showing the legal character/registration of the entity.

**APPENDIX 2:** Environmental protection questionnaire

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| Appendix B – Environmental Protection Questionnaire |
| **Applicant’s name (o):** |
| **Address (street and number, postal code and city):** |
| **Phone & Fax:** |
| **E-mail:** |
| **Main activity of the applicant (description of activity):** |
| **First name, last name and signature of responsible person completing the questionnaire:** |
| **Questionnaire completion date:** |
| **Instructions for completing the questionnaire**The questionnaire shall be completed by a highly ranked representative of your institution, who submits the questionnaire, together with other requested documents, for assessment to the CDMPE. The questionnaire shall be signed by a person authorized to represent the company. Please, whenever possible, provide complete and elaborate answers to all questions. The questionnaire has been divided into sections as follows:Section **1**: GeneralSection **2**: Site locationSection **3**: Permits/state of the environment In case of any doubts, or should help be needed when completing the questionnaire, feel free to contact the Environmental Focal Point for the Sub-project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Ms/Mr. \_\_\_\_\_\_\_\_, Phone , email:  |

|  |
| --- |
| GENERAL |
| Nature of the Grant request and Type of Activity |
| Purpose of grant – please indicate your answer:* Procurement of working capital
* Purchase of land
* Construction of new facilities (building/plant)
* Reconstruction of existing building
* Rehabilitation of monuments
* Extension of and/or adding stories to existing building
* Renovation and/or maintenance of existing building
* Purchase of machines and/or equipment
* Construction/reconstruction of communal infrastructure (water supply, wastewater disposal, sewerage, gas, electricity etc.)
* Purchase of transportation vehicles
* Construction, expansion, reconstruction of devices for processing exhaust gases, wastewaters and other waste materials
* Construction/reconstruction of roads, trails and similar
* Rehabilitation of roads, trails and similar
* Education provision
* Networking
* Acquiring technical support
* Capacity building
* Soft infrastructure sub-projects
* Other, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (*If your answer is: “financing of investment in working capital”, please provide answers just under General form and Planned activities at the site)* |
| Please provide a description of your sub-project. Describe investment site, sub-project cost, business expansion plans, describe current status and reasons for carrying out the sub-project, provide planned annual production/service volume etc. |
| Please provide the name of your main activity and write down the respective code (NACE): |

|  |
| --- |
| SITE LOCATION |
| Planned Activities at Site |
| Will the sub-grant proceeds be used for financing the procurement of raw materials needed for production? | * yes
 | * no
 |
| Will the sub-grant proceeds be used for financing the procurement of equipment?What kind\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * yes
 | * no
 |
| If the sub-grant proceeds will be used for the procurement of raw materials needed for production, please provide, for every raw material item, the specific trade name, type and chemical designation if possible (please, do not use abbreviations).* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| Will the sub-grant proceeds be used for the procurement of pesticides? | * yes
 | * no
 |
| Is a raw material item or its constituent part included in the List of Hazardous Substances (in accordance with the regulations of the country [[1]](#footnote-1)) | * yes
 | * no
 |
| Is the sub-sub-project located in or affects a protected area/protected species?(*national park, nature park, nature reserve, monument of nature and horticultural monument, important landscape, protected woodland*) | * yes
 | * no
 |
| Is the sub-sub-project located in, or affects a cultural site, object, monument or building?(*potentially archaeologically significant site/in the vicinity of a historical site*) | * yes
 | * no
 |
| Are there any public complaints against your current or planned activities? If yes, please describe the respective complaints. | * yes
 | * no
 |
| Is sub-sub-project located in the forest area and as such would cause damage to the forest or cutting of forest? If yes, please describe the impact. | * yes
 | * no
 |
| Will the sub-sub-project have trans boundary impacts? If yes, please describe how. | * yes
 | * no
 |
| Will the sub-sub-project cause changes in the quantity of quality of international waterway or its tributary? If yes, please describe how. | * yes
 | * no
 |
| Will the sub-sub-project support construction of any kind of dam or involve dam rehabilitation? If yes, please describe how. | * yes
 | * no
 |
| Profile of the site |
| Please indicate the nature of your site:* Industrial area/business zone
* Developed part of construction area (including urban areas)
* Agricultural area
* Protected natural area - ecological network
* Coastal/riparian area
 |
| If you have a specific sub-sub-project, please elaborate (describe) the nature of the site |
| Who is the current owner of the plot / real estate, on which the sub-project is planned to be carried out?Please provide the number of cadastral plot and land register plot, state the cadastral municipality, the number of land register file and the name of the owner (*address, contact person and telephone number if the owner is not the investor*) *Please submit a copy of land registry document* |
| Is the property being used by any other person besides the owner, i.e. does any other person (besides the owner) receives income from the use of land / site / plot? (*Lease, contract, concession, protected lease-holder etc.*) | * yes
 | * no
 |
| Are there any illegal users of the land / estate? If yes, please provide details | * yes
 | * no
 |

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| PERMITS AND STATE OF THE ENVIRONMENT |
| Permits |
| Have you obtained any permits for the facilities you plan to construct? (*Please indicate those you have obtained*)* Location permit - land allocation permit
* Architecture-planning assignment (plan/design/building development permit)
* Emission permit
* Integrated ecological permit
* Licenses or agreement (contract) for use of natural resources
* Permit to use natural resources
* Special purpose water use permit
* Special permit for trans boundary risk for human health and environment
* Permit of import/export of ozone depletes
* Acceptance Commission approval (operation permit)
* Technical passport
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please, enclose the copies of all permits with the filled questionnaire.* |
| Please indicate sub-projects documents already prepared:* Conceptual design
* Preliminary design
* Main design
* Final design
* EIA
* SEA
* Screening EIA
 |
| Do you have the use permit for you existing facilities? Please, enclose a copy of the permit with the questionnaire if, according to the design, works are planned to be carried out on existing facilities. | * yes
 | * no
 |
| Did your existing facility require EIA? If yes, please provide copy | * yes
 | * no
 |
| Did your existing facility require emission permit/integrated ecological permit? If yes, please provide copy | * yes
 | * no
 |
| Was your existing facility visited by the inspection (state, provincial, town ecological audit, sanitary, etc.) in the last 5 years? If yes, please provide copy of the finds | * yes
 | * no
 |
| Status of the environment (according to national EIA legislation) |
| Is it necessary to carry out an environmental impact assessment procedure according to national legislation with regard to your sub-project? | * yes
 | * no
 |
| Have you already obtained the decision on environmental impact assessment acceptability?Please, enclose a copy of the decision with this questionnaire. | * yes
 | * no
 |
| Does your sub-project require screening EIA? | * yes
 | * no
 |
| Is there a decision on screening EIA? Please, enclose a copy of the decision with this questionnaire. | * yes
 | * no
 |

Expression of Interest Checklist

**Please use the following questionnaire to help you present a complete Expression of Interest. Incomplete proposals run the risk of being ineligible.**

|  |
| --- |
| **TIMETABLE** |
|  | Yes/No |  | Answer |
| My proposal respects the scheduled start date: |  | Start date of the proposal: |  |
| My proposal respects themaximum duration of theproposal: |  | End date of the proposal: |  |
| **ELIGIBILITY** |
| My proposal targets at least one of the listed destinations |  |  |  |
| My proposal respects thelegal status criteria forapplicants |  | My proposal involves the following co-applicants |  |
| My proposed activity is not on the list of activities that cannot be financed |  |  |  |
| My sub-project addresses the needs /gaps identified in the call for proposal |  |  |  |
| I have filled in the Environmental Protection Questionnaire |  |  |  |
| **FINANCING** |
| My budgetary proposalrespects the minimumco-financing rate in % |  | My proposed co-financing rate is  |  |
| My budgetary proposalrespects the maximum LRCPco-financing ceiling in MKD |  | The requested amount from LRCP Project in MKD |  |
| I am not receiving financing from any other institutions/donors for the same activities proposed in this proposal |  |  |  |

1. [↑](#footnote-ref-1)