

**APPLICATION FOR CONCESSIONS**

**EXPANSION OF**

**SERVICE OPERATIONS**

**CONCESSIONS WILL BE GRANTED UNDER THE FISCAL INCENTIVES AMENDMENT ACT NO. 3 OF 2019 OF THE LAWS OF THE COMMONWEALTH OF DOMINICA**

1. **Approved architectural plans from the Physical Planning Division ( In case of physical plant expansion)**
2. **Copy of land registration certificate with survey plans or a copy of a registered lease agreement of at least three (3) years.**
3. **Proof of approval of funding from financial institution.**
4. **Copy of financial statements.**
5. ***The enterprise must be in compliance with:***
6. **The requirements of the Dominica Tourism Regulations and Standards Act No. 19 of 2005.**
7. **Tax requirements administered by the Inland Revenue Division**
8. **Social Security requirements administered by the Dominica Social Security**
9. **Business registration requirements administered by the Companies and Intellectual Property Office**
10. **Health requirements administered by the Environmental Health Unit**
11. **Any other requirements as per the Laws of the Commonwealth of Dominica**
12. Company/Enterprise Name:

………………………………………………………………………...............….......

1. Address: ………………………………………………………………………………………………………………………………………………………………………………………………................................................................................................
2. Telephone: …………………….……… Fax: ………………..............................

Email: ...................................................... Web site………………………………

1. Indicate whether the business is a:

(a) Sole proprietorship …………………………….

(b) Public/private company …………………………….

(c) Partnership …………………………….

(d) Other (please state) ……………………………

1. Why do you intend to expand/refurbish your present business?

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1. Provide a description of the planned expansion or refurbishment work to be undertaken

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1. What new special features and amenities will be added to your business?

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1. Indicate any new services that will be provided as a result of the expansion or refurbishment.

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1. What is the projected start-up date for the expansion?

Month: ………………………………….. Year: …………………...

1. Describe the expected impact of the expansion on the existing operation:

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Will there be new markets targeted as a result of the expansion?

Yes ................... No ..............

If yes, Please explain

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1. How will the expansion improve the competitiveness of your business?

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1. Employment as a result of the expansion:

**Permanent:**

|  |  |
| --- | --- |
| **EMPLOYEE TYPE** | **PROPOSED # OF NEW EMPLOYEES** |
|  |  |
| Managers |  |
| Supervisors |  |
| Skilled |  |
| Unskilled |  |
| Other |  |
| **TOTAL** |  |

# of employees during **Construction:**...........................................

###### Investment Required:

Currency used (EC$) Rate of exchange: US$1.00 = EC$2.70

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **EQUITY** | | **LOAN** | | **TOTAL** |
|  | Local | Foreign | Local | Foreign |  |
| Preliminary costs  Plans, assessments etc. |  |  |  |  |  |
| Land |  |  |  |  |  |
| Building |  |  |  |  |  |
| Machinery & Equipment |  |  |  |  |  |
| TOTAL |  |  |  |  |  |

1. Is the planned expansion investment a result of
   1. Joint venture partnership..........................
   2. Increase demand for your services .......................
   3. Depreciating plant and property ..........................
   4. Other ...................................
2. List the concessions requested:

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**THIS SECTION IS RELATED TO PREVIOUS CONCESSIONS GRANTED TO THE ENTERPRISE.**

1. Was the enterprise able to meet the required level of investment?

YES ............ NO ......................

If NO, please explain:

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1. Indicate the amount of investment undertaken since granted the concessions.

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1. Was the enterprise able to meet the required level of employment?

YES ............ NO ......................

If NO, please explain:

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1. Were the previous concessions fully utilized?

YES ............ NO ......................

If NO, please explain.

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1. The Constitution of the Commonwealth of Dominica enshrines certain fundamental rights of the individual. Please comment on the attitude of the company towards the right to organize on the part of the workers:

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1. I certify that to the best of my knowledge, the information given in this application and in the attached documents are correct.

Name: ………………………………………………….....…………...........………

Signature: …………………………………… Date: ..........................………

**Please address to:**

**INVEST DOMINICA AUTHORITY**

First Floor, Financial Centre

Roseau

**COMMONWEALTH OF DOMINICA**

Tel: (767) 448-2045

Fax: (767) 448-5840

Email: [info@investdominica.dm](mailto:info@investdominica.dm)

Website: [www.investdominica.com](http://www.investdominica.com)