

Form D20 Micro Small Medium Enterprise Enhancement Program (MEP) Request Form

Program Enrollment Request Form				www.belizeinvest.org.bz/mep				
Primary Adviser: (office use only)				Tier: (office use only)				
Part 1	Contact Information (mandatory)							
First Name:			MI:	Last Name:				
Personal Email Add	lress:							
Position: Owner Partner CEO President								
Work Phone:			Home Phone:					
Fax:			Mobile Phone:					
Mailing Address:								
City/Town/Village:			District:					
Gender:			Age:					
Employer Social Security Registration Number:								
Part 2 Business Information								
Business Name:			Type: Company Business Co-operative Other					
Business Email Address:								
Status: Not-In-Bu	siness Starting New Busine	ess 🗌 In-Business	Date Established (MM/DD/YY):					
Tax Identification Number (TIN):			Importer's TIN:					
Business Social Security Registration Number:								
Ownership: Male Female Both			Website:					
Business Type: : Agro-processing Aquaculture Creative Industry – Artisan Creative Industry – Other Fashion and Design Food and Beverage Light Manufacturing Manufacturer Personal Products Other:								
Organization Type: Sole Proprietorship Partnership Limited Liability Company (LLC) Corporation Other:								
International Activity: Export Both								
Physical Address:								
City/Town/Village:								
# Employees: (Mandatory)	Full Time: Female: Male:	Part Time: Female: Male:	Description of P	roduct:				

Disclaimer: "By filling out, signing, and returning the MEP Request Form by email or by Fax, you are authorizing an electronic substitute of your written signature on the form,"

University of Belize Faculty of Management and Social Sciences College Street, West Landivar Belize City, Belize Phone: (501) 223-3195

Fax: (501) 223-7427 Email: mep@belizeinvest.org.bz Belize Trade and Investment Development Service $\overline{\mbox{Beltraide}}$



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Annual Sales:										
Less than \$100,000										
Less than \$500,000										
More than \$500,000 but less than \$1.5 million										
Capital Expenditure to date: (How much was invested in equipment and other capital?) (Mandatory) Less than \$50,000										
Less than \$150,000										
More than \$150,000 but less than \$500,000										
Manufacturing space: Less than 371.612m2 (4,000 sq ft.)										
Manufacturing space: 371.612m² to 557.418m² (4,000 sq. ft. to 6,000 sq. ft.)										
Dimension (ft)										
Do you conduct your business online?				Is this a home-based business?						
Are you a Client of SBDCBelize? Yes No										
If no, would you like to become a SBDCBelize Client? : Yes No										
Areas of assistance required: Packaging Dabelling Marketing* Product Research* Product Development*										
(*Available to SBDCBelize Clients) Quality Standards* Other (Specify):										
Shortlist of Packa		nd Labeling Materials used by			Overstite (Manually, Denie)	1				
	No.	Item	HS CODE	1	Quantity (Monthly Basis)					
						-				
ENTERPRISE SIZE	(MSM	E) -MANDATORY (OFFICIAL US	E ONLY)							
Micro: (less than 5 (five) full time employees OR less than \$50,000 capital investment; AND less than \$100,000 in annual sales)										
Small: (more than 5 but less than 20 employees; AND less than \$150,000 capital investment or less than \$500,000 in Annual Sales)										
Medium: (20 to 50 employees; AND \$150,000 to \$500,000 capital investment OR \$500,000 to \$1.5 million annual sales										
Large (if none of the above)										
·										
Client Signature: Date:						_				

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