**APPLICATION FOR PIONEER STATUS**

**FOR A NEW**

**DESIGN SERVICES COMPANIES**

**A. PARTICULARS OF COMPANY**

1. Name of company: ………………………………………………………

1. Address of company: ……………………………………………………

………………………………………………………………………………………..

Telephone No. : … ………………………….. Fax No.: … ……………………….

1. Name of contact person : ………………………………………………………..…

Designation :… … ………………………………………………………………..…

Telephone No. : ……………………….. Fax No. : … …………………..…

1. Date of incorporation of company/registration of business :……………………

(Attach a copy of the Certificate of Incorporation/Registration)

1. Company registration no. : ... ... ... ... ... ... ... ... ... ... ... .. ... .. ... ... ... .
2. Income tax reference no. : ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ...
3. Income tax branch office : ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ...
4. Date of approval / certificate of registration from the Malaysian Design Council: …………………………..……… (Attach a copy of the letter/certificate)
5. Particulars of Directors

|  |  |  |
| --- | --- | --- |
| Name and residential address | Nationality | % shares held |
|  |  |  |

1. Incentives approved by other government agencies (if any):

…………………………………………………………………………………………………

**B. PARTICULARS OF DESIGN PROJECTS/ACTIVITIES**

|  |  |
| --- | --- |
| 1. | Please specify the produce/products for each project/activity to be carried out. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Produce/products | Title | Objective | Research duration | Methodology | |
| Schedule | Method and technique |
|  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| 2. | Design to be carried out: | |
|  | Design to be carried out | Equipment/tools used |
|  |  |
|  |  |

**C. PROJECT COST**

|  |  |
| --- | --- |
|  | **RM** |
| (1) Fixed assets |  |
| (a) Land (specify size)\*  ………………………………. | ……………… |
| (b) Buildings\*  (specify built-up area)  …………………………………. | ……………… |
| (c)Machinery and equipment\* | ……………… |
| (d)Other equipment | ……………… |
| Total Fixed assets | **………………** |
| (2) Pre-operational expenditure | ……………… |
| (3) Working capital | ……………… |
| Total | **===========** |

Note: \* If the land, building, machinery and equipment are rented/leased,

Indicate the annual cost of rental/lease.

**D. FINANCING**

|  |  |  |
| --- | --- | --- |
|  | Existing  **RM** | % |
| 1. Authorised capital | ……………….…… |  |
| 2. Shareholders’ fund |  |  |
| (i) Paid-up capital |  |  |
| 1. Malaysian individuals   Bumiputera  Non Bumiputera | ……………….……  …………………… | ……  …… |
| ………………………  ……………………… | ……………………  ……………..…… | ……  …… |
| 1. Foreign individual/company   (specify name and country) | | |
| ………………………  ……………………… | ……………  …………… | ……  …… |
| Total (a), (b) and (c) | **……………** | **……** |

\* For 2 (b) provide equity structure as follows:-

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Bumiputera  (%) | Non Bumiputera  (%) | Foreign  (%) |
| ……………………………………… | ............ | ............ | ........... |
| ……………………………………… | ............ | ............ | ........... |

|  |  |
| --- | --- |
|  | **RM** |
| (ii) Reserved (excluding capital appreciation) | ………………… |
| Total (i) and (ii) | **…………………** |
| 3. Loan |  |
| Domestic  Foreign | …………………  ………………… |
| Total | **…………………** |
| 4. Other sources |  |
| ………………………………………… | ………………… |
| ………………………………………… | ………………… |
| Total | **…………………** |
| Total 2, 3 and 4 | **============** |

Note : Attach a copy of the latest audited accounts.

**E. EMPLOYMENT**

1. Please fill in where relevant

Please note that the information is required to enable the government to undertake the appropriate manpower planning to meet the specific manpower needs of companies proposing to establish projects in Malaysia.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Employment  category | | Full-time employment | | | | | | Total | |
| Malaysian | | | Foreign | | | Malaysian | Foreign |
| Degree | Diploma/ Certificate | Others | Degree | Diploma/ Certificate | Others |
| 1. | Managerial staff |  |  |  |  |  |  |  |  |
| 2. | Designers |  |  |  |  |  |  |  |  |
| 3. | Clerical and other workers |  |  |  |  |  |  |  |  |
| **Total** | |  |  |  |  |  |  |  |  |

Note:

\* If there is more than one location, please provide the same information on a separate sheet of paper

|  |  |
| --- | --- |
| 2. | Details on key Designers |

|  |  |
| --- | --- |
| Designation | Responsibility |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 3. | Percentage of science and technical staff having degrees or diplomas with a minimum of 5 years experience (of the total workforce) | : | \_\_\_\_\_\_ % |
| 4. | Number of Staff with Post Graduate (ie. Masters/PhD etc) qualifications | : | \_\_\_\_\_\_ |
| 5. | In addition to the full-time employees as mentioned in the above tables, please provide the number of workers which are outsourced (not under the company’s payroll) | : | \_\_\_\_\_\_ |

**F. EMPLOYMENT BY INCOME**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Employment  category | | Number of Persons Employed by Average Monthly Salary\* (RM) | | | | | | | |
| <3,000 | | 3,000-<5,000 | | 5,000-<10,000 | | 10,000 and above | |
| Malaysian | Foreign National | Malaysian | Foreign National | Malaysian | Foreign National | Malaysian | Foreign National |
| 1. | Managerial staff |  |  |  |  |  |  |  |  |
| 2. | Designers |  |  |  |  |  |  |  |  |
| 3. | Clerical and other workers |  |  |  |  |  |  |  |  |
| **Total** | |  |  |  |  |  |  |  |  |

1. **ESTIMATED LABOUR COST AND EARNINGS**

1. ESTIMATED LABOUR COST - Salaries and Wages\*

|  |  |  |  |
| --- | --- | --- | --- |
| Year in Operation | Year 1 | Year 2 | Year 3 |
| Salaries and Wages (RM) |  |  |  |

Note:

\*Include wages, salaries, bonuses, social insurance contribution and all employee benefits

1. ESTIMATED EARNINGS

|  |  |  |  |
| --- | --- | --- | --- |
| Year in Operation | Year 1 | Year 2 | Year 3 |
| (a) Estimated Earnings before Interest, Tax, Depreciation & Amortization (EBITDA) (RM) |  |  |  |
| (b) Estimated Net Income After Tax (RM) |  |  |  |
| * Held in Malaysia as reserves (%) |  |  |  |
| * Remitted out of Malaysia (%) |  |  |  |
| * Reinvested in Malaysia (%) |  |  |  |

**H. MAJOR MACHINERY AND EQUIPMENT**

|  |  |
| --- | --- |
| Machinery and equipment | Cost  **RM** |
|  |  |

**I. INCOME**

|  |  |
| --- | --- |
| 1. | Please provide actual/estimated income derived/to be derived from design activities and other activities during the first 3 years of operation. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Year | Income derived from design activities  (RM) | % | Other sources of income\*  (RM) | % | Total income  (RM) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| \* | Please specify the activities: | |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  | |

**J. DECLARATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I , |  | | , the |  | |
|  | (name) | |  | (designation) | |
| of | | |  | | |

(name of company/society)

|  |  |
| --- | --- |
| (i) | hereby declare that to the best of my knowledge, the particulars furnished in this application are true. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (ii)\* | have engaged/is planning to engage the services of the following consultant for my application : | | | | |
|  |  | | | | |
|  |  | Company Name | : |  |  |
|  |  | Address | : |  |  |
|  |  | |  |  |  |
|  |  | |  |  |  |
|  |  | Contact Person | : |  |  |
|  |  | Designation | : |  |  |
|  |  | Telephone no. | : |  |  |
|  |  | Fax no. | : |  |  |
|  |  | E-mail | : |  |  |
|  |  |  |  |  |  |
|  |  | |  |  | |
|  | I take full responsibility for all information submitted by the consultant(s). | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | | | |
|  |  | | | |
|  |  | | | |
|  |  |  |  |  |
|  |  | Date |  | (Signature) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  | (Company’s stamp) |
|  | \*Please complete this section if the company has engaged/is planning to engage the services of consultant(s) to act on behalf of the company. Please provide information on a separate sheet of paper if space is insufficient | | | |