

OGSE DEVELOPMENT GRANT (OGSE DG) APPLICATION FORM

PROJECT TITLE: _____

Instructions to Applicant:

- Please submit 1 hard and 1 scanned copies of this form.
- All information required for this form must be fully completed.
- For information which may require more space than provided, please provide additional information separately as an attachment.

For MPRC's office use only

Date received: _____

Malaysia Petroleum Resources Corporation

Unit 20-11, G Tower, Jalan Tun Razak,

50400 Kuala Lumpur,

Wilayah Persekutuan Kuala Lumpur

Tel: +603-2858 8555

www.mprc.gov.my

SECTION A: COMPANY DETAILS

Applicant Details	
1.	Company name:
2.	Company registration number:
3.	Business address:
4.	Company Status: <i>Please choose one ONLY.</i> <input type="checkbox"/> Mid-tier Company (MTC) <input type="checkbox"/> Small Medium Enterprise (SME)
5.	Bumi/Non-Bumi Status: <i>Please choose one ONLY.</i> <input type="checkbox"/> Bumiputera <input type="checkbox"/> Non-bumiputera
6.	Women Entrepreneurs? <i>If the company majority shareholder is woman, it is consider as woman entrepreneurs.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Date of incorporation:
8.	Date of commencing business:
9.	Authorised capital:
10.	Paid-up capital:
11.	Core Business Activities:

12. Structure of shareholding:
If your majority shareholders are company, please provide the company's SSM Form (Form 24 only).

Shareholder Name	% of shares	No. of shares	Share values (RM)	Nationality
1.				<input type="checkbox"/> Malaysian <input type="checkbox"/> Foreign Please indicate: _____
2.				<input type="checkbox"/> Malaysian <input type="checkbox"/> Foreign Please indicate: _____
3.				<input type="checkbox"/> Malaysian <input type="checkbox"/> Foreign Please indicate: _____
TOTAL:				

13. Grant/Funding track record:
*Please state if your company is currently a recipient of or have previously received any funding from other government ministries or agencies **within the last three (3) years**. If yes, please provide the following details:*

Type/Name of fund	Ministry/ Agency	Project Title	Year received/duration	Grant Amount	Status

**Please attach certified true copy of Form 9, Form 24, Form 44, Form 49 and M&A of the company*

SECTION B: PROJECT PROPOSAL

Part 1: Project Details													
1.	Project Title:												
2.	Problem Statement: <i>Please describe the problem statement to support your solution. Highlight the PAIN POINT of the industry</i>												
3.	Description of Solution: <i>What is it? How does your solution help to minimize the industry PAIN POINT? Please provide what you have achieved/done so far.</i>												
4.	Technology Readiness Level (TRL): <i>Please tick (/) one TRL based on your current project TRL</i> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 1 Basic Principle Observed </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 6 Technology Demonstrated in Relevant Environment </td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 2 Technology concept formulated </td> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 7 System Prototype Demonstration in Operational Environment </td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 3 Experimental Proof of Concept </td> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 8 System Complete and Qualified </td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 4 Technology Validated in Lab </td> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 9 Actual System Proven in Operational Environment </td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> TRL 5 Technology Validated in Relevant Environment </td> <td></td> </tr> </table>	<input type="checkbox"/> TRL 1 Basic Principle Observed	<input type="checkbox"/> TRL 6 Technology Demonstrated in Relevant Environment	<input type="checkbox"/> TRL 2 Technology concept formulated	<input type="checkbox"/> TRL 7 System Prototype Demonstration in Operational Environment	<input type="checkbox"/> TRL 3 Experimental Proof of Concept	<input type="checkbox"/> TRL 8 System Complete and Qualified	<input type="checkbox"/> TRL 4 Technology Validated in Lab	<input type="checkbox"/> TRL 9 Actual System Proven in Operational Environment	<input type="checkbox"/> TRL 5 Technology Validated in Relevant Environment			
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5.	Project Business Model Canvas (BMC): <i>Please fill in the Attachment 1 together with this Application Form.</i>												
6.	Project Costing: <i>Please itemise and provide breakdown for expenses of each component and subcomponent you have identified in the Attachment 2 together with the Application Form.</i>												
7.	Project Team: <i>Describe the technical and business capabilities, qualifications, and experience of project team members. Please attach CV of each team member as per item 4 in the checklist.</i> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">1.</td> <td style="width: 30%;">Name</td> <td></td> </tr> <tr> <td></td> <td>Role</td> <td></td> </tr> <tr> <td></td> <td>Highest Qualification</td> <td></td> </tr> <tr> <td></td> <td>Experience</td> <td></td> </tr> </table>	1.	Name			Role			Highest Qualification			Experience	
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	Highest Qualification												
	Experience												

	2.	Name	
		Role	
		Highest Qualification	
		Experience	

Part 2: Project Benefit

1. SWOT Analysis:
Provide SWOT Analysis of your propose solution.

STRENGTH	WEAKNESS
OPPORTUNITY	THREATS

Part 3: Intellectual Property Right (IPR)

1. Do you have any Intellectual Property Right (IPR) related to the project proposal?

YES NO
(If no, please proceed to Question No.3)

2. Type of Intellectual Property Right (IPR):

<input type="checkbox"/> Patent	<input type="checkbox"/> Industrial Design
<input type="checkbox"/> Trademark	<input type="checkbox"/> Copyright
<input type="checkbox"/> Trade Secret	<input type="checkbox"/> Others Please state: _____

3. IP Registration Number:
Reference number provided by MYIPO

4. Would your project require IP acquisition¹/licensing²?

YES NO
(If no, please proceed to Section C)

5. Type of required IP:

Outright Acquisition/Assignment

Licensing

6. Intellectual Property Details:

	Application Number	Filing Date	Filing Status	Owner of IP
1.				
2.				
3.				

7. Cost of IP Acquisition/Licensing:

	Items	Cost (RM)
1.	IP Acquisition / Licensing	
2.	Training (Know-how transfer)	

8. Novelty of IP acquisition/licensing to be acquired:

9. Proposed IP acquisition/licensing date:

Note:

Definition:

1. IP Acquisition/Outright Acquisition/Assignment: The process by which ownership of work product created for an entity by an employee or consultant is transferred to the entity.

2. IP Licensing: The transfer of rights in an IP right from the owner to another, short of an assignment of all rights. The licensor retains ownership of the IP right and allows the licensee to engage in acts which would constitute infringement if not for the licence.

SECTION C: MARKET AND FINANCIAL FORECASTING

1.	<p>Market Need</p> <p><i>Please elaborate extensively by providing qualitative information</i></p>																												
2.	<p>Market Size and Potential</p> <p><i>Please provide Quantitative Information to support your proposal – how big is the market? What are your target market?</i></p>																												
3.	<p>Competitor Analysis</p> <p><i>Please provide apple-to-apple comparison. If you found that there are no competitor at the moment, please compare with the conventional method/solution.</i></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 30%;">Item</th> <th style="width: 20%;">Your Solution: XYZ Management System</th> <th style="width: 20%;">Competitor A: ABC Tracking System</th> <th style="width: 30%;">Competitor B: DEF Apps Management</th> </tr> </thead> <tbody> <tr> <td>Features</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Technology</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Advantage</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Disadvantage</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Price</td> <td></td> <td></td> <td></td> </tr> <tr> <td>User-friendly</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Item	Your Solution: XYZ Management System	Competitor A: ABC Tracking System	Competitor B: DEF Apps Management	Features				Technology				Advantage				Disadvantage				Price				User-friendly			
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4. Financial Forecasting (Company)

Please elaborate extensively by **providing basis and assumptions used.**

Item/Year	Year 1	Year 2	Year 3	Year 4	Year 5
Revenue					
(COGS)					
Gros Margin					
(Expenses)					
Net Income/(Loss) before Tax					
(Tax)					
Net Income/(Loss) after Tax					

Basis and Assumption used for financial forecasting:

Please provide certified true copy of company's latest audited account or management account for the **last three (3) years.*

SECTION D: DECLARATION

This form **must be** signed by the Project Leader and endorsed by the CEO/MD.

I / We certify that:

All information provided in this application, including attachments, are true and correct to the best of my / our knowledge. I / We hereby declare that the company is free from any civil or criminal proceedings and understand that any wilful dishonesty may render for refusal of this application or immediate termination of the contract (if awarded).

Project Leader:

Name:

Designation:

Signature:

Date:

CEO/MD:

Name:

Designation:

Signature:

Date:

Form Checklist

No	Items	Tick
1.	Duly signed of this Application Form	
2.	Certified true copy of form 9, Form 24, Form 44, Form 49 and M&A of the company	
3.	Certified true copy of company's latest audited account/management accounts for the last three (3) years	
4.	CVs of all project personnel referred to in Section B: Part 2 of this Project Proposal Form	
5.	Business Model Canvas (BMC) - Attachment 1	
6.	Project Costing – Attachment 2	
7.	Other attachments (i.e., supporting documents such as, Licensing Agreement etc.)	