



# Guyana Office for Investment (GO-Invest)

## APPLICATION / EXPRESSION OF INTEREST FORM

Please submit three (3) signed copies of this form to GO-Invest.

**Form# GOI 001**

### SECTION A

Name of client(s)

Business Registration number

.....  
.....

.....  
Taxpayers Identification Number (TIN)

Company/Business name

.....

.....  
.....

Date form submitted.....

Local address

Overseas address

.....  
.....

.....  
State.....

Administrative region #.....

Zip code.....

Phone number.....

Phone number.....

Email address.....

Website.....

Type of investor:

Activity currently involved in

Local

Overseas based Guyanese

Foreign

Joint Venture

.....  
.....

### Sector of Interest

(Please tick where appropriate)

Non-traditional agricultural development, agro-processing, aquaculture or the production of bio- fuels	
Energy	
Information and communications technology, not including retail and distribution	
Value-added wood processing	
Petroleum exploration, extraction and refining	
Services	
Tourism	
Mineral exploration, extraction and refining	
Textile production	
Bio-technology	
Development and manufacturing of new pharmaceutical products, chemical compounds or the processing of raw materials to produce injectables.	
Infrastructural development, or the production of electricity using renewable sources of energy	
General manufacturing	
Other sector:.....	

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Products or services being produced:

.....  
.....  
.....

Will Genetically Modified (GM) inputs be used in the production of commodities?      YES / NO

If yes, please state type and indicate in what way:

.....  
.....

Source of Raw Materials:       Local       Foreign

**Target Markets**

Markets to be supplied:

.....  
.....

Countries to be supplied:

.....  
.....

Local (percentage)

Overseas (percentage)

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**SECTION B**

**What is your company requesting from the Government of Guyana?**

- Land
- Fiscal Concessions
- Assistance with Government Ministries and/or Agencies
- Licenses (State type(s)) .....
- Work Permits
- Markets for products       National       Regional       International
- Other .....

**Project Summary:**

Enquiry

New Investment

Major Expansion

Brief description of the project to be undertaken:

.....  
.....  
.....  
.....  
.....  
.....

Proposed location of project:

Administrative Region Number:

.....

.....

Proposed commencement date of project

.....

<b>Phase</b>	<b>Value of Investment</b>	<b>Summary of Activity</b>
1		
2		
3		
4		
5		
Total		

Source of funding

Brief description of source of funds:

Local

Equity

.....

Foreign

Bank

.....

What is your company's estimated/projected annual sales? .....

**Project Financing Details**

**Percentage breakdown of source of funding**

**Equity \_\_\_\_\_%**

**Bank Loan \_\_\_\_\_%**

<b>Source of Funding</b>	<b>Dollar Amount (\$)</b>
Equity	
Bank Loan	
Other Loan	
Grant	
Reinvestment of Profits	
<b>TOTAL</b>	

Timeline for Investment \_\_\_\_\_ months

**Project Financing Details / Requirements**

(For use by GO-Invest, GRA and relevant Agencies)

<b>Item #</b>	<b>Funding Type</b>	<b>Details Required</b> -Evidence that confirms ability to finance the proposed Project.
1	Equity	Bank statement, evidence that equity in land or building owned will be used. Valuation, loan/financing arrangements, etc.
2	Bank Loan	Copy of Loan / Letter of Credit Agreement.
3	Reinvestments of Profits	Evidenced from Cash Flow Statement, copy of most recent Statement of Accounts and/or Tax Return.  Statement from Investor that a given percentage of profits will be reinvested within a specific timeline.
4	Grant – Gov’t or other	Copy of approval and or disbursement.
5	Loan from Friend	Loan Agreement, evidence of friend’s ability to fund.

**Employment**

*Current number of employees*

*Number of jobs to be created by new investment*

Permanent: .....

Permanent: .....

Temporary/Contractual: .....

Temporary/Contractual: .....

Management: .....

Management: .....

Non-management: .....

Non-management: .....

Part-time: .....

Part-time: .....

Total: .....

Total: .....

Phase 1 – Implementation Period (months)

Phase 1 – Expected Employment

.....

Temporary .....

Permanent .....

Phase 2 – Implementation Period (months)

Phase 2 – Expected Employment

.....

Temporary .....

Permanent .....

**Cash Flow Projections for Company**

	Gross Revenue	Net Revenue	Forecasted Expenditure
Year 1			
Year 2			
Year 3			

(Note: information supplied for this section will be used to generate a Net Economic Impact Analysis of the proposed investment)

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**SECTION C**

**Information/ Documents requested by GO-Invest (please fill in appropriately what is available, what is being processed and what remains outstanding for action).**

<b>Information/Document</b>	<b>Details</b>
1. Business Registration/ Certificate of Incorporation	
2. GRA and VAT Registration / TIN Certificate	
3. Compliances – GRA Tax and NIS (for existing operations)	
4. Lease / Transport for land (for project location)	
5. Licenses / Permits from EPA, F&D, CH&PA, etc. For Factory, Sawmill, Rice Mill, SFP, etc.	
6. Business Plan (including list of capital items for concession)	

Expected date for submission of outstanding Information/Documents requested: .....

Upon signature of this document, the Client consents to GO-Invest:

- (a) Sharing the Project information submitted with relevant Government agencies including GEA, EPA, GFC, GL&SC, NIS, GRA, NIS, etc.
- (b) Performing due diligence research on the Client and the Project, and taking reasonable steps to ensure the Client and the Project, are familiar and compliant with the Laws of Guyana.

Please ensure the provision of accurate data, as project progress monitoring will be conducted against the details provided herein as well as the details contained in subsequent proposals.

After an Investment Agreement is executed, the terms of the agreement may be enforceable for a period of five years, pursuant to **Section 36 of the Customs Act**, Chapter 82:01.

Signature of Client: .....

Signature of Officer: .....

Witnesses: 1 .....

2 .....

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**Review Process** (for Official use only)

Status:

.....  
.....

Comments of Officer:

Recommended

Not Recommended

.....  
.....  
.....  
.....

Signature: .....

Date: .....

Name of Officer: .....

Designation: .....

Comments of CEO:

Recommended

Not Recommended

.....  
.....  
.....  
.....

Signature: .....

Date: .....