

# Winnie Madikizela-Mandela Local Municipality

Physical Address  
51 Winnie Madikizela  
Mandela Street  
Postal Address  
P O Box 12  
Bizana



Office of the Municipal  
Manager  
Tel: 039 251 0230  
Fax: 039 251 0917  
[lmahlaka@mbizana.gov.za](mailto:lmahlaka@mbizana.gov.za)

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## NOTICE NO: DP/LED MSME's Capacitation and Support: Automotive and Manufacturing Sector

Winnie Madikizela-Mandela Local Municipality Local Economic Development is inviting MSME's to apply for the Capacitation and Support. The program is developed specifically for MSME's in the **Automotive (E.g. Panel Beaters, Automotive Electricians, Mechanical Repairs etc)** and **Manufactures (e.g Welders, Detergents Producers, Brickmakers etc)**

### Selection Criteria:

1. The business must be registered with the Companies and Intellectual Property Commission (CIPC)
2. The business must be Tax compliant. Registered with SARS
3. Business Plan or profile of the business
4. The business must be in operation for at least 12 months.
5. The business must be owned by a Winnie Madikizela Mandela Local Municipality Resident
6. Vulnerable groups (Women, Youth and People with Disability) are encouraged to apply

### How to apply

1. Completed and signed application form
2. The form should be submitted with: **CIPC Certificate, SARS confirmation letter, Identification documents, Business Plan or Profile of the Business and Proof of resident**
3. **NB: All selected applicants will be visited for verification and assessment.**

Application forms will be available at the LED offices, councilors and municipal website. **Advertised on the 21<sup>st</sup> July 2025 and closed not later than 08<sup>th</sup> August 2025 at 12H00.** Applications must be submitted at Winnie Madikizela-Mandela Local Municipality LED offices

All enquiries may be referred to Mr. B Hlangabezo: LED Manager @ 039 251 0230/ [hlangabezob@mbizana.gov.za](mailto:hlangabezob@mbizana.gov.za)



MR. L MAHLAKA  
MUNICIPAL MANAGER

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*Vision: A vibrant socio economic growing municipality that creates sustainable communities with equal opportunity for all.*

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## APPLICATION FOR MSME's Capacitation and Support 2025

### 1. Business Details

Name of the business	
Physical Address of the Business	
Ward	

### 2. Ownerships details

Name		Surname	
Id No		Gender	
Contact No		Alt Contact number	
Physical Address			
Disability(y/n):	Youth(Y/N):	WMMLM Resident(Y/N):	

### 3. Company Details

Company registration	
SARS Registration	
Consent or confirmation letter from local authority	
The date or year the business in operation	
Business Plan or Profile	
Proof of resident	
Owners highest qualification	

### 4. Business needs(Summary)

The need	Estimated cost
1.	
2.	
3.	

\_\_\_\_\_  
Initials and Surname

\_\_\_\_\_  
position

For office use

\_\_\_\_\_  
Date

\_\_\_\_\_  
Initials and Surname

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

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