

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

NOTICE NO: PD/LED AGRIC 01/05/26

FARMERS DEVELOPMENT PROGRAMME

Winnie Madikizela-Mandela Local Municipality is inviting interested farmers to apply for Farmers Development Funding.

Eligibility Criteria;

- It must be a business that has been operating for a minimum of 1 year
- The program is strictly for agricultural production inputs, Equipment, Material, Fencing and irrigation.
- Applicants must have 2 hectares and above.
- The applicants must operate within Bizana jurisdiction.

NB: First preference will be given to vulnerable groups (Women, Youth & people with disability) subject to compliance requirements.

- All applicants will be screened and vetted. Shortlisted farmers will be notified telephonically or via sms.
- **The funding does not cover building of structures, buying of a tractor or a bakkie.**

Applicants are expected to provide the following to be considered:

- Completed application form.
- Be a registered entity (CIPRO/CIPC Certificate)
- Letter of intent (off-take agreement)
- Valid tax clearance/Pin number.
- Certified ID copies of all members or directors.
- Letter from ward councilor confirming existence of the project/business (not proof of residence)
- Business Plan.
- Three months bank statement of the business or Book keeping records.
- Proof of land ownership or lease agreement. (duration of the lease must 5 years or more)
- Supporting quotations.
- Affiliation of any business structure

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

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Disqualification;

- Canvassing with politicians or municipal officials will lead to disqualification.
- Failure to comply with relevant bodies e.g. SARS, CIPC will lead to disqualification.
- Failure to submit certified copies of any of the required documents will lead to disqualification.
- Faxed or emailed applications will not be accepted.
- Incomplete applications will lead to disqualification.
- No persons in the service of the state will be considered

Applications must be submitted at Winnie Madikizela Mandela Local Municipality LED Office, 51 Winnie Madikizela Mandela Street, and Bizana 4800. **Closing 05 June 2026 at 12H00.** Applications must be in a sealed envelope and must be clearly marked **Farmers Development Programme, Project name and Contact details of the project.** Applications forms will be available at our LED Offices and municipal website. **Communication will be limited to successful applicants only.**

All enquiries may be referred to Mr. B Hlangabezob: LED Manager @ 039 251 0230 hlangabezob@mbizana.gov.za.



MR. L MAHLAKA
MUNICIPAL MANAGER

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APPLICATION FORM 2026-27 FINANCIAL YEAR

PROGRAM NAME: FARMERS DEVELOPMENT

To be completed by applicant (compulsory)

APPLICANT NAME AND SURNAME	
POSITION OF THE APPLICANT	
COMPANY/PROJECT NAME	
LOCATION/VILLAGE	
WARD	
CONTACT NO	
ALTERNATIVE CONTACT NO	
EMAIL ADDRESS	

SECTION 1

A	Company details								
1.	Business name								
2.	Trading name (if any)								
3.	CIPC Registration No.								
4.	No of years in operation								
5.	No of permanent employees								
	No of casual employees								
7.	No of disable persons								
8.	Category of business (mark with "x")	Farming	Wholesale	Retail	Hawker	Catering	Salon	Tourism	Other(specify)
9.	Affiliation of any business structure?								
10.	Access to market? If yes, where and how								

B	Details of primary contact person								
1.	Title								
2.	Name								
3.	Surname								
	ID number								
5.	Citizenship								
6.	Position								
7.	Contact number								
8.	Email address								
9.	Physical address								
10.	Ward								
11.	Ward counsellor								

C **Company Banking details**

1.	Name of the Bank	
2.	Account No	

D **Financial Information of the business (Assets and Liabilities)**

Assets		Liabilities	
Category	Amount	Category	Amount
1. Fixed Property	R	Rent	R
2. Vehicle	R	Business Loans	R
3. Equipment	R	Bank overdraft	R
4. Stock	R		
5. Cash in bank	R		
6. Other (specify)	R		
TOTAL	R	TOTAL	R

E **Company associates/members/directors**

	Associate Name	Associate Surname	Contact No	Role/Position
1.				
2.				
3.				
4.				

F **Declaration of previous support received from other government institution (including trainings) from the last three (3) financial years**

	Type of support	Institution Name	Year	Contact person and number
1.				
2.				
3.				
4.				
5.				

SECTION 2

A

SUPPORT REQUESTED

List items requested and estimated cost (attach quotation)

ITEM

Amount

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

16.

17.

18.

19.

20.

SECTION 3

A CHECKLIST

NB: INDICATE WITH (X)	SUBMITTED?
1. Completed application form	
2. CIPRO/CIPC Certificate	
3. Letter of intent (off-take agreement for the market)	
4. Valid tax clearance/Pin number.	
5. Certified ID copies of all members or directors.	
6. Letter from ward councillor confirming existence of the project/business (NOT proof of residence)	
7. Business Plan.	
8. Three months bank statement of the business or Book keeping records.	
9. Proof of land ownership or lease agreement. (duration of the lease must be from 5 years or more)	
10. Supporting quotations	
11. Affiliation of any business structure	

