[Sender Name]

[Company (if already founded)]

[Address]

[E-Mail]

[Web Site (if available)]

**SUBJECT**: Application to ESA BIC Austria for the location of

Graz, at Science Park Graz

Wr. Neustadt, at accent Gründerservice

**REF**.: [please insert your own reference number here]

Dear Madam, dear Sir,

In response to the Permanent Open Call for Proposals for Business Incubation issued by Science Park Graz (SPG), we are pleased to submit **our proposal** to host [insert name of existing company or company to be founded] in your BIC.

Please find annexed the following information:

* Requirements Checklist
* Space Connection
* Funding, Technical and Business Support Requests
* Executive Summary

Please find attached hereto the following documents:

* Business Plan
* Incubation Proposal

1. The Application is **compliant with the Requirements** set out in the Call for Proposals as shown in the Requirement Checklists attached to this document.
2. The **contracts conditions have been read, understood and accepted**.
3. [If your start-up is not yet legally constituted, please state the following] As of the Application submission date, the start-up company is not yet legally constituted. It will be constituted before the contract signature, in case the proponents are invited to place a contract by ESA.
4. [If your start-up already exists and was registered in the Chamber of Commerce less than 5 years before the Application date, please state the following] As of the Application date, the start-up company applying to ESA BIC Austria is already constituted. A copy of the Chamber of Commerce Registration Form is attached to this Cover Letter.

Any queries relevant to the proposal are to be addressed to the attention of:

Name(s): XXXX

Address(es): XXXX

Phone: XXXX

E-Mail: XXXX

Contact information of the person(s) who will be in charge of the day-to-day management:

Name(s): XXXX

Address(es): XXXX

Phone: XXXX

E-Mail: XXXX

Contact information of the legal representatives who will be in charge of signing the contract:

Name(s), representing a minimum of 50% of company ownership in total: XXXX

Address(es): XXXX

Phone: XXXX

E-Mail: XXXX

**Signature(s): Submission** **Date:** XX.XX.201X

[insert Sender(s) Name(s) & Title(s) representing min. 50% company ownership, as per Chamber of Commerce registration form]

|  |  |
| --- | --- |
| **Name**: XXXX | **Name**: XXXX |
| **Title:** XXXX | **Title:** XXXX |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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# REQUIREMENTS CHECKLIST

|  |  |
| --- | --- |
| **ESA General Application Requirements:** | **Compliance statement** |
| The Applicant’s product or service is based on a transfer of space technology to, and/or utilisation of a space system in a non-space environment (spin-off), or exploitation of non-space technology in the space market (spin-in). | [Compliant] |
| The Applicant sells and delivers innovative products, processes or services (consultancy is excluded) for his own account and risk. | [Compliant] |
| The Applicant’s first registration at a chamber of commerce has taken place no longer than 5 years prior to submission of Applicant’s proposal. [attach Chamber of Commerce Registration Form, if available] | [Compliant] |
| In case the Applicant has legal personality, the Applicant does not form part of a group at the time of submission of the Applicant’s proposal. This means that no less than half the issued capital is owned – directly or indirectly – by the authorised representatives applying on behalf of the Applicant. In case the Applicant is a legal entity without legal personality, the Applicant is a fully authorised general partner. Please provide the names of the owner(s) of the company and the related shareholding. | [Compliant] |
| Shareholders of the company in question are:  (1) [Name] (XX%); (2) [Name] (XX%); (3) [Name] (XX%); (4) [Name] (XX%); … |  |
| The Applicant does not conduct business activities promoting or being related to alcohol, tobacco, religion, politics, intolerance, violence, firearms, pornography, obscenity, gambling or illegal drugs. | [Compliant] |
| The Applicant shall provide a copy of an official identity form with this application. | [Compliant] |
| The Applicant is able to communicate in English. | [Compliant] |
| The Applicant will inform of any financial support received during the execution of the incubation contract and acknowledges the State Aid restrictions applicable in the European Union. | [Compliant] |
| The Funding is linked to work packages within the incubation project only. | [Compliant] |
| The Funding is granted in net amounts (not including VAT). | [Compliant] |
| The Applicant states that the terms and conditions of the draft of the ESA BIC Incubation Contract and the draft of the Local Incubation Contract are accepted without reservations. | [Compliant] |
| The information provided in the application and in the supplementary data sheet is binding and forms the basis of the funding granted. Any changes in this information must be reported immediately and are subject to approval. | [Compliant] |

I hereby declare that my application is compliant to the General Application Requirements or that I shall undertake all necessary actions to ensure the compliance to the same.

**Signature(s): Submission** **Date:** XX.XX.201X

[Insert Name(s)/Title(s) representing min. 50% company ownership, as per Chamber of Commerce]

|  |  |
| --- | --- |
| **Name**: XXXX | **Name**: XXXX |
| **Title:** XXXX | **Title:** XXXX |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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|  |  |
| --- | --- |
| **ESA BIC Austria Specific Application Requirements:** | **Compliance statement** |
| The Applicant states that the terms and conditions of the draft ESA BIC Incubation Contract and the draft Local Incubation Contract are accepted without any reservations. In addition, the Applicant states that all the key personnel under the incubation contracts have all the relevant working permits for the duration of the incubation contracts. | [Compliant] |
| The Applicant states not to be hosted in another business incubator, or entity or entity or organisation providing similar support - for the duration of the incubation contract. | [Compliant] |
| The Applicant shall set up and register a company establishment in Austria prior to the start of the business incubation. | [Compliant] |
| The authorized representative of the Applicant must become a resident of Austria before signing an Incubation Contract. | [Compliant] |
| In case the Applicant is a legal entity, the company must fall into the UE definition of SME[[1]](#footnote-1). | [Compliant] |
| The company headquarters are to be located at one the offices of ESA BIC Austria (SPG or accent). | [Compliant] |
| Local conditions of the incentive scheme: The applicant has to provide all documents requested by financial partners and to comply with all conditions required. | [Compliant] |
| Local conditions of the Loan Scheme from Local Bank or other funding mechanism: The applicant has to provide all documents requested by financial partners and to comply with all conditions required. | [Compliant] |

I hereby declare that my application is compliant to the Specific Application Requirements or that I shall undertake all necessary actions to ensure the compliance to same.

**Signature(s): Submission** **Date:** XX.XX.201X

[Insert Name(s)/Title(s) representing min. 50% company ownership, as per Chamber of Commerce]

|  |  |
| --- | --- |
| **Name**: XXXX | **Name**: XXXX |
| **Title:** XXXX | **Title:** XXXX |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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# EXECUTIVE SUMMARY

*Writing Tips: Copy/Paste of Paragraph 1 of the Business Plan]*

Text

# SPACE CONNECTION

*Writing Tips: Copy/Paste of Paragraph 4.1 of the Business Plan.*

Text

# SUPPORT REQUEST OVERVIEW

*Writing Tips: Please summarise on max. ½ page:*

* *The requested cash funding (ESA, Local, own resources and other sources)*
* *Whether you plan to make use of a loan or other financial scheme*
* *The technical support hours requested*
* *The business support hours requested*

*Please also provide summary information of your own resources allocated to the activity.*

Text

# Attachments

*Please include scans of IDs for all individuals signing the Cover Letter. Please attach the Chamber of Commerce Registration Form, if available.*

1. <http://ec.europa.eu/growth/smes/business-friendly-environment/sme-definition/index_en.htm> [↑](#footnote-ref-1)