**Primary Assessment Form for the**

**Applicants of Investment Projects**

 **Imam Khomeini Airport City Company**

Please complete and enclose the following form as a description of your investment plan, in addition to the pertinent documents. This form consists of 3 parts.

**Part 1- Participant Profile**

In case of being a part of a Holding company, inscribe your company’s profile, and in case the shareholders are the legal entities, the tables of part 1 have to be filled out for the aforementioned shareholders.

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| **Table 1- Company profile** |
| 1. Full name of the company according to the official newspaper.
 |
| 2. National ID: | 3. Establishment date:  | 4. Company registration number: |
| 5. Company registration place: |  6. Nationality of the company: |
| 7. Company type: Special joint stock companies Public joint stock limited liability Cooperative company Institution Others |
| 8. Affiliation: |
| 9. The amount of registered capital by shareholders: | 10. Statute of membership in Unions: |
| 11. The amount of paid capital by shareholders: |
| 12. Accepted on the stock exchange: Yes No |
| 13. Address: |
| 14. Telephone number:  | 15. Website Address: |
| 16. Email: | 17. Fax: |

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| **Table 2- Board of directors and Shareholders** |
| **Name and family name** | **National ID** | **Position** | **Percentage share** |
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| **Table 3- CEO & representative profile** |
| CEO’s name and family name: | Cell phone number:Phone number: | Email: |
| Representative name and family name: | Cell phone number:Phone number: | Email: |

* Please enclose a copy of the company’s article of association in addition to the official newspaper which contains the company’s announcement and its changes along with this form.
* In the event that the company is part of a Holding or group, please enclose the company’s structure by mentioning its percentage share.

**Part 2- Experiences /resume and financial ability**

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| **Table 4- Company’s activities and products** |
| 1. Company’s activities:
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|  |
| 1. Main products and services:
 |
|  |
| 1. What is the company’s competitive advantages over competitors?
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|  |
| 1. What are your weaknesses?
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|  |
| 1. Who are your most important competitors?
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|  |
| 1. What is your long-term strategy for expansion or downsizing expected?
 |
|  |
| 1. How much was your company’s export based on the number of transactions (contracts), weight or Rial amount, in the last 3 years?
 |
|  |
| 1. How many full-time employees are there in your company?
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|  |
| 1. Please confirm that no Resolution has been passed or no Order of the Court made for your company’s bankruptcy, winding-up, bona fide reconstruction, amalgamation or taxes; and that your company is not the subject of proceedings for any of the above procedures

Accept Not accept  |
| 1. Would it be possible to provide adequate answers, in case of requesting the documents?

Yes No |
| 1. If you are a subsidiary of a holding or group, would it be feasible for the main company to guarantee your commitments? Yes No

Please attach the letter of agreement if your answer is yes. |
| 1. Have you ever had participation experience? Yes No

Please render its list if the answer is yes. |

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| **Table 6- Investment Experiences** |
| Project title | Investment field | Investment date | Total investment volume(Million Rial) | The amount of investment which has been made in this project (Million Rial) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| * Your company’s investment date is considered.
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| **Table 7- Executive power** |
| Please submit and enclose the followings in addition to this form. |
| * Organization chart.
* Academic CV & empirical experiences of key executives and experts.
* Introduction of work experiences of the company’s domestic and foreign partners.
* A list of projects which has been done and are in progress.
* Operating licenses from the competent authorities.
* Documentation of membership in associations and unions.
* Implementation and obtaining a management system and quality assurance certificate or similar certificates.
* Providing examples of good performance certificates.
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| **Table 8- Financial ability** |
| **Description** | **Last year** **(………….)** | **Two years ago (………)** | **Three years ago (………….)** |
| **Gross income** |  |  |  |
| **Total current assets** |  |  |  |
| **Total long-term assets** |  |  |  |
| **Total current liabilities** |  |  |  |
| **Total long-term liabilities** |  |  |  |
| **Net profit** |  |  |  |
| **Current Guarantees** |  |  |  |
| **Financial turnover****(Total gross cost and income)** |  |  |  |

* Please render and enclose the balance sheet of the audited report in addition to this form.

Name and family name of authorized signatory:

Position:

Date:

Signature:

**Part 3- Proposal attributes**

In this part, it is not necessary to submit the detailed and precise content of the proposal attributes, on the other hand, creating a better picture of participation form is required. If more meticulous and precise studies have been carried out by your company, it will be helpful to accelerate the assessment process.

1. Representative and informed person profile:

Name and family name:

Position:

Telephone and cell phone number:

Email:

1. Explain the issue of partnership.
2. List your relevant experiences in accordance with the issue of participants and enclose its documents.
3. Describe the product or provided services in the proposed plan, in addition to its target market and the demand status.
4. Describe the required raw materials of the proposed plan and its supply resources as well as the access status of those resources.
5. Indicate the required land area, features of land location along with proposed location (if there is any).
6. Indicate the required floor area and its main parts.
7. Describe your specific utilized machineries and their technology’s status in comparison to existing technologies.
8. Describe the level of employment as well as the necessity to any human resources with their specific features.
9. Determine the amount of required investment in different parts of the plan separately.
10. Indicate the sources of funding.
11. Do you have any foreign partners in your considered plan? Please name them, if your answer is positive.
12. Please determine the proposed participation model with IKAC.
13. Time scheduling of funding and implementation of the plan
14. Please indicate the required licenses/permits.
15. Other cases.

Name and family name of authorized signatory:

Position:

Date:

Signature: