|  |  |  |  |
| --- | --- | --- | --- |
| (Official Use Only)  To: ReTAAS Secretariat  HKPC Building,  78 Tat Chee Avenue,  Kowloon, Hong Kong    Email: retaas\_sec@hkpc.org | | | |
| Date of Receipt | |  |  |
| Reference No. | |  |  |
|  |  | |  |

Application Form for

Retail Technology Adoption Assistance Scheme for

Manpower Demand Management (ReTAAS)

|  |
| --- |
|  |

**Please read the Guide to Application (www.retaas.hkpc.org) before completing this application form. An applicant shall submit one application form for each project. Enquiries can be directed to the Secretariat by phone at 2788 6262.**

|  |
| --- |
| **Section A – Particulars of the Applicant** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** | **Enterprise Information** (Please refer to Section 2.1 of the Guide to Application.) | | | | | | |
|  | Name in English : |  | | | | | |
|  | Name in Chinese : |  | | | | | |
|  | Business  Registration No. : |  | |  | Year of Establishment : |  | |
|  | Registered Address : |  | | | | | |
|  | | | | | |
|  | Website : |  | | | | | |
|  | Tel No. : |  |  | | Fax No. : |  |  |
|  | Email Address : |  | | | | | |

Types of Business # (Please put a "√" in the box appropriate)

|  |  |
| --- | --- |
| 471 - Supermarkets / convenient stores / department stores | 4771 – Clothing / footwear / leather articles |
| 472 - Food / alcoholic / drinks / tobacco | 4772 - Medical & health goods / Chinese drugs & herbs / cosmetic / personal care products |
| 473 - Fuel / petrol / kerosene / L.P. Gas | 4773 - Vehicles & accessories |
| 474 - Computers / phone / audio and video equipment | 4774 - Jewelry / optical / photographic equipment / watches & clock / musical instruments / flower & plants / pets / gifts / office appliances |
| 475 - Household equipment / electrical appliance / furniture | 4775 - Antiques, stamp collection, second-hand goods |
| 476 - Books / newspapers /stationery / toys / sporting equipment / computer games | 478 - mobile stalls, mail order or internet sales |
| Others, please specify: | |

# Please refer to the Hong Kong Standard Industrial Classification Version 2.0 issued by Census and Statistics Department for details. Type of business not under these codes may also be considered by ReTAAS.

Type of Sales Channels (Please put a "**✓**" for one or more box(es))

|  |  |
| --- | --- |
| Street level physical shop | Upstairs shop |
| Online shop | Consignment counter in department stores |
| Exhibition/Fair : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Others, please specify:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Is the enterprise listed in Hong Kong or elsewhere? (Yes/No)\*

\* Please cross out as appropriate.

Form of Business:

|  |  |  |  |
| --- | --- | --- | --- |
| Form of Business | | | Name  (Hong Kong Identity Card / Passport No) |
|  | Sole Proprietorship | Owner |  |
|  | Partnership | All Partners |  |
|  | Limited Company**[[1]](#footnote-1)** | Individuals holding ≥ 30% shares |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. Project Co-ordinator** (Please refer to Section 12.1 of the Guide to Application.) | | | | | | | | | |
| Name in English : | |  | |  | | | |  | |
| (Mr/ Ms/ Prof/ Dr) \* | | (Last Name) | | (First Name) | | | | (Name in Chinese) | |
| Post Title : | |  | | | | | | | |
| Tel No. : | | |  |  | | Fax No. : | |  | |  |
| Email Address : | |  | | | | | | | |
| Is he/she a staff under Applicant Company? (Yes/No)\* If not, please specify as below: | | | | | | | | | |
| Name of Enterprise: | |  | |  | | | Relationship#: |  | |  |

# Please provide the proof of enterprise relationship of Project coordinator and Applicant Company.

\* Please cross out as appropriate.

**3. Have / are any related enterprises[[2]](#footnote-2) sought / seeking funding support from ReTAAS? Please put a "✓" in the box(es) provided.**

Yes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of related enterprise(s) | : |  | | |
| Business Registration No | : |  | | |
| Project Title | : |  | | |
| Application No | : |  | Date of Submission : |  |
| Amount of Funding  Sought (HK$) | : |  | Approved Funding Amount (HK$): |  |
| Vetting Result |  | Approved  Rejected  Withdrawal  Still under process | | |
| Remarks : | : |  | | |

No

**4. Have you sought or are you seeking funding support for this or similar project from other public funding sources (e.g. Innovation and Technology Fund, SME Funding Schemes, Dedicated Fund on Branding, Upgrading and Domestic Sales, etc.)? Please put a "✓" in the box(es) provided.**

Yes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Funding | : |  | | |
| Project Title | : |  | | |
| Application No | : |  | Amount of Funding  (if applicable): |  |

Approved[[3]](#footnote-3)3 Not approved Pending application outcome

No

**5. Where did you learned about ReTAAS? (Please put a "✓" for one or more box(es))**

HKPC Seminar  Exhibition  HKPC / ReTAAS Website  ReTAAS Videos

HKPC Staff Visit  HKPC Newsletter / Publication  Referral by Grantee / Solution Provider

Referral by Trade Association \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Section B – Project Proposal** |

1. **Project Title:**

|  |  |
| --- | --- |
|  |  |
|  |  |

**2. Project Nature: (Please put a "✓" for one or more box(es))**

|  |  |  |  |
| --- | --- | --- | --- |
|  | POS System | Inventory Management System | |
|  | eShop | Mobile Apps | |
|  | Accounting System | CRM System | |
|  | Security & Surveillance | HR / Staff eLearning System | |
|  | Product Kiosk | Others: |  |
|  |  |  |  |

1. **Project Item(s)**

|  |  |  |
| --- | --- | --- |
| Item Description | Quantity/Duration | Details  (such as the technologies to be applied  or the services to be procured) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Locations of the proposed project**   Address(es) | | | Shop | | Office | | Warehouse | |
| (1) |  | |  | |  | |  | |
| (2) |  | |  | |  | |  | |
| (3) |  | |  | |  | |  | |
| (4) |  | |  | |  | |  | |
| (5) |  | |  | |  | |  | |

Please insert more rows if more than 5 locations

1. **Implementation Plan**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Project Duration:  (no. of month) | | | |  | | |
|  | User(s) of the Project: | | | |  | | |
|  | Post(s) | | (i) |  | | Training Needed: (Yes/No)\* | |
|  |  | | (ii) |  | | Training Needed: (Yes/No)\* |
|  |  | | (iii) |  | | Training Needed: (Yes/No)\* |
|  | If yes, please provide details of training plan: | | |  | | | |
|  |  | | | |
|  |  | | | |
|  | | | \* Please cross out as appropriate. | | | | | |

1. **Existing Retail Manpower**

**Number of Staff: \_\_\_\_\_\_**

**Does the Applicant employ any salaried staff? Please put a "✓" in the box(es) provided.**

Yes

|  |  |  |
| --- | --- | --- |
|  | \_\_\_\_\_ Permanent employees | \_\_\_\_\_ Part-time employees |

No

The reason(s) of not having salaried staff is/are listed as below:

|  |
| --- |
|  |
|  |
|  |

1. **Justifications for the Project**

Please state in clear and specific terms on the following -

(i) existing manpower problem or opportunities for manpower demand management;

(ii) how the project helps effectively address the problem/seize the opportunities;

(iii) relevant research, survey or experience, if any.

|  |
| --- |
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1. **Other information in support of the application, if any**

|  |  |
| --- | --- |
|  | |
|  | |
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|  | |
|  | |
|  | |
|  | |
|  | |
|  | |  | |

1. **Self-Assessment on Manpower Savings**

(i) Existing approach (Please briefly describe by referring to your input in Item 6 of Section B above.)

|  |  |  |  |
| --- | --- | --- | --- |
| Workflow  (Please describe the steps/tasks involved) | Technologies involved, if any | No. of staff deployed | Man-hours used  (per month) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | Total (A) |  |

(ii) Proposed approach

|  |  |  |  |
| --- | --- | --- | --- |
| Workflow  (Please describe the steps/tasks involved) | Technologies to be involved  (including the new technologies/applications to be funded by the Scheme) | No. of staff to be deployed | Man-hour to be used  (per month) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | Total (B) |  |
| Expected Man-hour reduction (A) – (B) hours: | |  |
| Hourly wages, $: | |  |
| Monthly Man-hours saving, $: | |  |
|  | Other productivity gained: | | |
| Monthly expenditure saved (such as overtime charge, profit made for redeploying staff on other tasks, etc.):   |  |  | | --- | --- | | Reduce cost (overtime charge) | Streamline workflow process | | Improve the quality of service | Improve staff working efficiency | | Saving in resources & reduction in carbon footprint | Redeploy staff on other task | | | |

|  |
| --- |
| **Section C – Project Budget** |

##### Value in HK$

|  |  |  |
| --- | --- | --- |
| Item | Unit/Monthly[[4]](#footnote-4) Cost | Total ($) |
| **(A1)** **Software Costs** |  |  |
|  |  |  |
| (ii) |  |  |
| (iii) |  |  |
| **(A2)** **Hardware Costs** |  |  |
|  |  |  |
| (ii) |  |  |
| (iii) |  |  |
| Subtotal (A) | - |  |
| **(B) Any other Direct Costs (e.g. setup, training)** |  |  |
| (i) |  |  |
| (ii) |  |  |
| (iii) |  |  |
| Subtotal (B) | - |  |
| **Project Cost (C)：(A) + (B)** | - |  |
| **Cash contribution by the Applicant (D)**  **(minimum of 50% of project cost)** | - |  |
| **Amount of funding support for project cost applied under ReTAAS (E)：(C) – (D)** | - |  |

|  |  |
| --- | --- |
| Item | Total ($) |
| **Audit Fee (F)** |  |
| **Amount of audit fee contribution by the Applicant (G)** |  |
| **Amount of audit fee support applied[[5]](#footnote-5)5 (H)：(F) - (G) (max. of $1,000),** |  |

|  |  |
| --- | --- |
| **Grand total of funding support applied under ReTAAS (E) + (H) (max. of $50,000 per enterprise),** |  |

|  |  |  |
| --- | --- | --- |
| **Section D – Declaration** | | |
| I, on behalf of, |  | , | |
|  | (Name of Applicant) |  | |

declare that:-

1. all factual information provided in this application as well as the accompanying information is true, valid and accurate and reflect the status of affairs as at the date of submission;
2. understand the consequence of wilfully giving any false, invalid or inaccurate information or withholding any material information and undertake to inform the ReTAAS Secretariat immediately if there are any subsequent changes to the above information;
3. utmost dedication and determination will be given to complete and monitor the Project according to the proposal stated in this application; and
4. the ideas of the proposed Project do not constitute any act or potential act of infringement of the intellectual property rights of other individuals and/or organisations.

The Applicant shall fully indemnify the Government and/or the Secretariat against any or all losses, liabilities and claims that may suffer, incur or in relation to this application or the Project.

The Applicant undertakes to repay in full all the disbursement of the approved grant made by the Government under ReTAAS, with interest, within such time specified upon notification by the Government or the Secretariat, in the event that any information provided herein is found to be false, invalid or inaccurate.

The Applicant acknowledges that the Government reserves the right to take any actions, including termination of the funding agreement and commencing legal actions, deemed appropriate against the Applicant for providing false, invalid or inaccurate information in support of this application.

The Applicant authorises the Secretariat and the Government to handle the personal data/ information provided in this application in accordance with the Guide to Application for Retail Technologies Adoption Assistance Scheme for Manpower Demand Management.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Authorised signature with organisation chop |  | Name and Position of signatory |
|  |  |  |
| Signature of Project Coordinator |  | Date |

Notes

(1) Please use separate sheets if the space provided for a particular item is insufficient.

(2) Applicants should submit the application form and the relevant supporting documents to the ReTAAS Secretariat by post, in person or by electronic means.

(3) Please note that all contents of your proposals set out in *items 1– 3 of Section A ; Section C* of this application form will be made available for public access at the ReTAAS website at [www.retaas.hkpc.org](http://www.retaas.hkpc.org) once approval for funding is given to your proposal. Members of the public may also be allowed to copy, distribute copies, or otherwise make use of the materials available at this website for non-commercial use. If you do not wish certain information to be released, please forward your request and justifications upon submission of your proposal.

1. If there is no individual holding 30% or more shares, please provide the name(s) and relevant information of the director(s). [↑](#footnote-ref-1)
2. Enterprises registered as different business under the Business Registration Ordinance (Chapter 310) but having the same individual(s) holder 30% or more ownership, would be treated as one single enterprise for the purpose of calculating the cumulative funding amount, i.e. subject to cumulating funding ceiling of $50,000. [↑](#footnote-ref-2)
3. 3 Project which is or will be in receipt of other government funding will NOT be considered by ReTAAS. [↑](#footnote-ref-3)
4. Must not exceed 6 months. [↑](#footnote-ref-4)
5. 5 A grantee may be reimbursed a maximum of $1,000 for the preparation of audited accounts, on a dollar-to-dollar matching basis, if the funding ceiling of $50,000 per enterprise has not been fully utilised. The grantee should provide the relevant invoice to the Secretariat for reimbursement (upon submission of the audited account). [↑](#footnote-ref-5)