|  |  |  |
| --- | --- | --- |
|  | **APPLICATION FOR TAX INCENTIVE FOR** **MWC OPERATOR IN MINES WELLNESS CITY (MWC)** | **DOCUMENT CHECKLIST** |

|  |
| --- |
| **DOCUMENT CHECKLIST** |
| **Name of company :** | **Please****(√) once completed** | **Remarks****(for MIDA use only)** |
|  | Three (3) sets of completed application form |  |  |
|  | Form 9 - Companies Act, 2016 (Certificate of Incorporation of Private Company) |  |  |
|  | Form 24 - Companies Act, 2016 (Relevant forms reflecting paid up capital) |  |  |
|  | Form 44 - Companies Act, 2016 (Notice of Situation of Registered Office) |  |  |
|  | Form 49 - Companies Act, 2016 (Particulars of Directors, Managers and Secretaries)  |  |  |
|  | Memorandum and Articles of Association |  |  |
|  | Confirmation Letter from Country Heights Holding Berhad confirming that the business is carried out in the MWC |  |  |
|  | If the Company has been incorporated for more than a year, please furnish a copy of the management / audited accounts |  |  |

|  |  |  |
| --- | --- | --- |
| **midalogoNew_coloured** |  | **www.mida.gov.my** |
|  | **MWC OPERATOR FORM*****(15.05.2020)*** |  |

**APPLICATION FOR TAX INCENTIVE FOR**

**MWC OPERATOR IN MINES WELLNESS CITY (MWC)**

|  |  |
| --- | --- |
| **1.** | **Type of incentive:** |
|  | (a) | Pioneer Status; or |  |
|  | (b) | Investment Tax Allowance |  |

|  |  |
| --- | --- |
| **2.** | **Type of establishment:** |
|  | (a) | Healthcare Services; |  |
|  | (b) | Traditional and Complementary Medicine; or |  |
|  | (c) | Other Qualifying Activities |  |

|  |  |
| --- | --- |
| **3.** | **Incentives approved by other Government agencies (if any):** |
|  |  |
|  |  |

**A. PARTICULARS OF COMPANY**

 1. Name of applicant / company: ……………………………………….…..............

2. Correspondence address: ……………………………………………..................

……………………………………………………………………………………......

Telephone No. : ………………………… Fax No. : ……………..........…….

3. Name of contact person : …………………………………………………………..

Designation : ………………………………………………………………………...

Telephone No. : ……………………….. Fax No. : …………............………

4.Date of incorporation of company: ………………………....................................

(Attach a copy of the Certificate of Incorporation)

5. Company registration no. : ... ... .... ... ... ... ... ... ... ... ... .. ... .. ... ... .................

6. Income tax reference no. : ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ....

7. Income tax branch office : ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ... ....

8. Date of license approval by the relevant Ministries / Authorities:

...........................................................................................................................

(Attach a copy of the approval letter)

9. Particulars of Directors

|  |  |  |
| --- | --- | --- |
| Name and residential address | Nationality | % shares held  |
|  |  |  |

Note: \* If insufficient space, please provide the same information on a separate sheet of paper.

**B. PARTICULARS OF SERVICES / TREATMENT**

1. Please list the type of services / treatment to be provided:

..................................................................................................................................

..................................................................................................................................

..................................................................................................................................

1. Proposed location of the project

..................................................................................................................................

..................................................................................................................................

..................................................................................................................................

1. Estimated date of commencement of business

..................................................................................................................................

**C. PROJECT COST**

 **RM**

1. Fixed assets

1. Land (specify area)\* …………………….....................

…………………………………

1. Buildings (specify built-up area)\* ………………............................

………………………………….

1. Machinery and equipment\* ……………………....................
2. Other equipment ……………………....................

 Total fixed assets

**……………………......................**

 2. Pre-operational expenditure ……………………......................

 3. Working capital …………………….....................

 Total

**==========================**

Note: \* If the land, building, machinery and equipment are rented / leased, indicate the annual cost of rental / lease.

**D. FINANCING**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | RM | % |
| 1. | Authorised capital | ................... |  |
| 2. | Paid-up capital |  |  |
|  |  (a**)** Malaysian individuals |  |  |
|  |  Bumiputera | ................... | ............ |
|  |   Non Bumiputera | ................... | ............ |
|  |  (b) Companies incorporated in Malaysia\* |
|  |   ..................................... | ................... | ............ |
|  |   ..................................... | ................... | ............ |
|  |  (c) Foreign individual/company (Specify name and country) |
|  |   ..................................... …………………… | ................... | ............ |
|  |   ..................................... …………………… | ................... | ............ |
|  |   Total (a), (b) and (c) | **...................** | **100%** |

|  |  |  |
| --- | --- | --- |
| 3. | Loan | RM |
|  |  Domestic | ................ |
|  |   Foreign |  ................ |
|  | Total  | **................** |
| 4 | Other sources (please specify) |  |
|  |  ................................................. | ................ |
|  | Total  | **................** |
|  | Total 2, 3 and 4 | **========** |

\* For 2 (b) provide equity structure as follows:-

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Bumiputera(%) | Non Bumiputera(%) | Foreign(%) |
| ……………………………………… | ............ | ............ | ............ |
| ……………………………………… | ............ | ............ | ............ |

**E. EMPLOYMENT**

Please fill in where relevant.

Please note that the information is required to enable the Government to undertake the appropriate manpower planning to meet the specific manpower needs of companies proposing to establish projects in Malaysia.

|  |  |  |
| --- | --- | --- |
| Employment category | Full-time employment | Total |
| Malaysian | Foreign | Malaysian | Foreign |
| Degree | Diploma/ Certificate | Others | Degree | Diploma/ Certificate | Others |
| 1. | Managerial staff  |  |  |  |  |  |  |  |  |
| 2. | Health services |  |  |  |  |  |  |  |  |
|  | 1. Doctors / Practitioners
 |  |  |  |  |  |  |  |  |
|  | 1. Nurses
 |  |  |  |  |  |  |  |  |
|  | 1. Therapists
 |  |  |  |  |  |  |  |  |
|  | 1. Others (please specify)

------------------------------- |  |  |  |  |  |  |  |  |
| 3. | Clerical and other workers |  |  |  |  |  |  |  |  |
| **Total** |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Percentage of science and technical staff having degrees or diplomas with a minimum of 5 years experience (of the total workforce) | : | \_\_\_\_\_\_ % |
|  | Number of Staff with Post Graduate (ie. Masters / PhD etc) qualifications | : |  \_\_\_\_\_\_  |
|  | In addition to the full-time employees as mentioned in the above tables, please provide the number of workers which are outsourced (not under the company’s payroll) | : |  \_\_\_\_\_\_  |

**F. EMPLOYMENT BY INCOME**

|  |  |
| --- | --- |
| Employment category | Number of Persons Employed by Average Monthly Salary\* (RM) |
| <3,000 | 3,000-<5,000 | 5,000-<10,000 | 10,000 and above |
| Malaysian | Foreign National | Malaysian | Foreign National | Malaysian | Foreign National | Malaysian | Foreign National |
| 1. | Managerial staff  |  |  |  |  |  |  |  |  |
| 2. | Health services |  |  |  |  |  |  |  |  |
|  | 1. Doctors / Practitioners
 |  |  |  |  |  |  |  |  |
|  | 1. Nurses
 |  |  |  |  |  |  |  |  |
|  | 1. Therapists
 |  |  |  |  |  |  |  |  |
|  | 1. Others (please specify)

------------------- |  |  |  |  |  |  |  |  |
| 3. | Clerical and other workers |  |  |  |  |  |  |  |  |
| **Total** |  |  |  |  |  |  |  |  |

1. **ESTIMATED LABOUR COST AND EARNINGS**

1. ESTIMATED LABOUR COST - Salaries and Wages\*

|  |  |  |  |
| --- | --- | --- | --- |
| Year in Operation | Year 1 | Year 2 | Year 3 |
| Salaries and Wages (RM) |  |  |  |

Note: \* Include wages, salaries, bonuses, social insurance contribution and all employee benefits.

1. ESTIMATED EARNINGS

|  |  |  |  |
| --- | --- | --- | --- |
| Year in Operation | Year 1 | Year 2 | Year 3 |
| (a) Estimated Earnings before Interest, Tax, Depreciation & Amortization (EBITDA) (RM) |  |  |  |
| (b) Estimated Net Income After Tax (RM) |  |  |  |
| * Held in Malaysia as reserves (%)
 |  |  |  |
| * Remitted out of Malaysia (%)
 |  |  |  |
| * Reinvested in Malaysia (%)
 |  |  |  |

**H. MAJOR MACHINERY AND EQUIPMENT**

|  |  |
| --- | --- |
| Machinery and equipment | Cost(RM) |
|  |  |

Note: \* If insufficient space, please provide the same information on a separate sheet of paper.

**I. PROJECT IMPACT ASSESSMENT**

|  |
| --- |
| **A. INFORMATION ON COMPANY BASIS – for the whole operation** |
| 1. **Holding / Parent Company**
 |
| Company Name | Country of Origin | Activity | Ranking | Market Share |
|  |  |  | *Fortune 500 / Forbes Global 2000 / Malaysia 100* | *Top 5 in Global / Asia Pacific / ASEAN / Malaysia* |
| 1. **Applicant Company**
 |
| 1. Financial performance for the last 3 years (for existing company applying for grant only):
 |
|  | Year 1 (RM) | Year 2 (RM) | Year 3 (RM) |
| Revenue |  |  |  |
| Cost of sales |  |  |  |
| Gross profit |  |  |  |
| Administrative expenditure and other operational expenditure |  |  |  |
| Profit (Loss) before tax |  |  |  |
| Tax |  |  |  |
| Net profit (loss) |  |  |  |
| Reserve |  |  |  |
| 1. Labour productivity at enterprise level

***Year 1*** *refers to:*1. *New company – first year of the company starts the operation of its new project*
2. *Existing company – first year of the company start the operation of its expansion/diversification project*

***EBITDA****: Earning Before Interest + Tax + Depreciation + Amortization****Labour Cost****: Wages and salaries (including commisions, bonuses and benefits), remuneration and EPF/SOCSO paid by employers****Employment****: All categories of employees, including working directors/propreitors/partners, unpaid family workers and part-time workers* |
|  | Existing (latest financial year) | Year 1 | Year 2 | Year 3 |
| EBITDA (RM) |  |  |  |  |
| Labour Cost (RM) |  |  |  |  |
| No. of Employment |  |  |  |  |
| Labour Productivity (RM/worker)$$\frac{EBITDA+Labour Cost}{Employment}$$ |  |  |  |  |

|  |
| --- |
| **B. INFORMATION ON PROJECT BASIS – for the proposed project only** |
| 1. **Estimated Revenue / Profit Before Tax**

*\*Year 1 refers to the first assessment year where the company starts its commercial operation**\*\*Revenue received by the applicant for services rendered to non-residents in the country and/or abroad* |
|  | Year 1\* | Year 2 | Year 3 | Year 4 | Year 5 |
| Revenue (RM) |  |  |  |  |  |
| * Percentage of Export\*\*
 |  |  |  |  |  |
| * Export destination (country)
 |  |  |  |  |  |
| Profit Before Tax (RM) |  |  |  |  |  |
| 1. **Capital Expenditure (CAPEX)**

*\*Value must be same as in the application form (fixed assets excluding land and building)**\*\*Local purchase – machinery & equipment are manufactured in Malaysia* |
| Machinery & equipment, furniture & fittings and other fixed assets(including warehouse and transportation equipment, medical devices, ICT equipment/Industry 4.0 - hardware and software, and other equipment used directly in the project) | Value\* (RM) | Percentage of local purchase\*\* (%) |
|  |  |
| Please indicate if the company invests in automation/digitalisation/Industry 4.0: |
|  | Value (RM) | Source of Technology (Malaysia or other countries) |
| Automation – machinery & equipment (technology by which a process or procedure is performed with minimal human assistance) |  |  |
| Digitalisation - information technology equipment (computers and related hardware); communications equipment; and software (includes acquisition of pre-packaged software, customised software and software developed in-house) |  |  |
| Industry 4.0 - big data analytics, autonomous robots, simulation, industrial internet of things, cyber security, horizontal and vertical system integration, cloud computing, additive manufacturing, augmented reality, artificial intelligence |  |  |
| 1. **Pre-operational Expenditure (Pre-OPEX)**

*\*Pre-operational refers to expenditures incurred prior to the commencement of operations. The value must be same as in the application form**\*\*Local spending – Payment made by company (applicant) for utilising services provided by resident companies and bodies of persons.* |
| Pre-operational Expenditure\* (*Examples: feasibility study, market research or survey)* | Value\* (RM) | Percentage of local spending\*\* (%) |
|  |  |
| 1. **Operational Expenditure (OPEX)**

*Note:*1. *Local spending – Payment made by company (applicant) for utilising services provided by resident companies and bodies of persons*

*(including salary & wage paid to local employees)*1. *Local Supplier – Sole proprietorship, partnership and locally incorporated company or by foreign company registered under the*

 *Companies Act 1965/Companies Act 2016 that supply services to their clients*1. *Operating expenditure* ***represent daily expenses*** *to run a business and not directly associated with production. The expenditure* ***exclude*** *the cost of production or cost of goods sold such as direct labour, direct materials, rent of production facilities, depreciation of production equipment and facilities, maintenance and repair of production equipment and facilities, utility cost for production facilities, interest expenses etc.*
 |
| Type | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| Transportation services |  |  |  |  |  |
| Banking services |  |  |  |  |  |
| Insurance services |  |  |  |  |  |
| Legal services |  |  |  |  |  |
| Information & Communication Technology (ICT) services |  |  |  |  |  |
| Salary and wages |  |  |  |  |  |
| Others (such as rental, utilities, sales & marketing other professional services) Please specify:(i)(ii)(iii) |  |  |  |  |  |
| Total |  |  |  |  |  |
| Percentage of local spending (%) |  |  |  |  |  |
| 1. **Productivity Related Expenses**

*Note: this expenses is not included in OPEX**\*Note:** *Automation – technology by which a process or procedure is performed with minimal human assistance*
* *Digitalisation – information technology equipment (computers and related hardware); communications equipment; and software (includes acquisition of pre-packaged software, customised software and software developed in-house)*
* *Industry 4.0 – big data analytics, autonomous robots, simulation, industrial internet of things, cyber security, horizontal and vertical system integration, cloud computing, additive manufacturing, augmented reality, artificial intelligence*
* *Intellectual Property (IP) refers to patents, trademarks, copyrights, industrial processes and designs, trade secrets, and franchises*
* *Research and development (R&D) means any systematic or intensive study carried out in the field of science or technology with the object of using the results of the study for the production or improvement of materials, devices, products, produce or processes.*
 |
| Type | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| Automation/Digitalisation/ Adoption of Industry 4.0 (non-CAPEX) |  |  |  |  |  |
| Intellectual Property (IP):* Charges for the use of IP
* Cost of registration and filing of IP
 |  |  |  |  |  |
| Research and development activities |  |  |  |  |  |
| Training of employees |  |  |  |  |  |
| 1. **Productivity Related Activities**
 |
| 1. Automation/Digitalisation/Adoption of Industry 4.0:
 |
|  | Name of Machinery/Equipment/ Hardware/Software | Function |
| Automation |  |  |
| Digitalisation |  |  |
| Adoption of Industry 4.0 |  |  |
| 1. Intellectual Property (IP):
 |
| 1. Using of IP
 |
| Type of IP | Owner of IP | Country |
|  |  |  |
| 1. Registration and filing of IP
 |
| Type of IP | Developed | Filed | Registered |
|  | Yes / No*If ‘Yes” – name of country* | Yes / No*If ‘Yes” – name of country* | Yes / No*If ‘Yes” – name of country* |
| 1. Generation of IP income
 |
| Type of IP | Annual Income (RM) |
|  |  |
| 1. Research & Development Activities
 |
| Name of R&D activities | In-house*(No. of R&D staff)* | Outsourcing to local incorporated companies*(Name of companies)* | Collaboration with local universities/research institutes*(name of local universities/research institutes)* |
|  |  |  |  |
| 1. Training of employees
 |
| Type of Training | No. of Malaysian Employee | In-house / external / overseas training | Collaboration with local universities/training institutes*(name of local universities/training institutes)* |
|  |  |  |  |
| 1. **Other Social & Environmental Measures**
 |
|  | Yes / No | Details |
| Industry-Academia Collaboration (other than R&D and training) |  | *Type of collaboration and no. of collaboration per year* |
| Structured Internship Programme for local students |  | *No. of students per year and qualification* |
| Apprenticeship Programme for local student |  | *No. of students per year and qualification* |
| Corporate Social Responsibility (such as scholarship, sponsorship, infrastructure development, contribution, etc) |  | *Type of CSR and no. of CSR per year* |
| Implement energy saving through energy efficiency or renewable energy or green building |  | *Type of energy saving and amount of saving per year* |
| Undertake recycling activity |  | *Type of recycling activity* |
| Utilisation of recycled materials |  | *Type of materials and source (Malaysia or other countries)* |
| Environment pollution (air, water, etc) |  | *If produce pollution, type of pollution control equipment installed* |

**J. DECLARATION**

|  |  |  |  |
| --- | --- | --- | --- |
| I , |   | , the  |  |
|  | (name) |  | (designation) |
| of |   |  |

 (name of company)

|  |  |
| --- | --- |
| (i)  | hereby declare that to the best of my knowledge, the particulars furnished in this application are true. |

|  |  |
| --- | --- |
| (ii)\* | have engaged / is planning to engage the services of the following consultant for my application : |
|  |  |
|  |  | Company Name | : |  |  |
|  |  | Address | : |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | Contact Person | : |  |  |
|  |  | Designation | : |  |  |
|  |  | Telephone no. | : |  |  |
|  |  | Fax no. | : |  |  |
|  |  | E-mail | : |  |  |
|  |  |  |  |  |  |
|  |  |  |  |
|  | I take full responsibility for all information submitted by the consultant(s). |

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |  |  |  |
|  |  | Date |  | (Signature) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  | (Company’s Stamp or Seal) |
|  | \* Please complete this section if the company has engaged / is planning to engage the services of consultant(s) to act on behalf of the company. Please provide information on a separate sheet of paper if space is insufficient. |