

# Apply for growth capital investment

Last Name\*

Complete the form below to find out if your business could be eligible for minority investment from ABGF.

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First Name\*

The eligibility form takes 5-10 minutes to complete, and no documents are required at this stage.

Please ensure that your submission is true and correct, and that you have provided enough information for us to review and understand your business.

## **Eligibility Form**

#### **Contact Details**

Title

Your email address*	Your m	nobile number*
our relationship to the	business*	<u> </u>
usiness Overview		
How many shareholdershareholder own?*	s are there in the business? V	What percentage does the largest
Business Name*	Business ABN*	Company Website*
City*	State*	Postcode*
Does the business oper Yes	ate in Australia and is headqı	uartered in Australia?*
No		0
Please choose the sect	or that best represent the op	erations of the business.*
Please provide a brief ov vhat makes it unique.*	/erview of the business, inclu	uding main products or services, an

Please provid business.*	e the total number of full-time equivalent (FTE) employees in your
inancial Info	ormation
-	e your company's <b>annual revenue</b> (in 000s) for the following financial \$50m, enter 50000. Please provide an estimate if exact figures are not
2 Years Ago (F	=Y23)*
Last Financial	l Year (FY24)*
0 15	
	ncial Year (FY25)*
An estimate or b	oudget for the year is fine.
	e your company's <b>EBITDA</b> (in 000s) for the following financial years. enter 5000. Please provide an estimate if exact figures are not available.
2 Years Ago (F	FY23)*
Last Financial	l Year (FY24)*
Current Finan	ncial Year (FY25)*
	oudget for the year is fine.
	nnual average capital expenditure (in 000s) required to maintain your Please provide an estimate if exact figures are not available.*
How much <b>ba</b>	nk debt, if any, does the business currently have?
	ncial year (FY24), what percentage of revenue did your top 5 customers Please provide an estimate if exact figures are not available.*
	nding is the business seeking (in 000s)? E.g. for \$5m, enter 5000. Please timate if exact figures are not available.*
What is the int	ended use of the funds? Select all that apply.*
	on Finance
☐ Change of	
	hic expansion
☐ Partial liqu	
_	development
	on capacity
<ul><li>Sales and</li></ul>	d marketing

<ul> <li>Succession planning</li> </ul>	
□ Talent acquisition	
☐ Working capital	
□ Other	
Form Submission	
How did you hear about the Australian Business Growth Fund?	
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#### **ABGF Updates**

As part of ABGF's growth insights, you will receive periodic updates on the fund, industry insights and portfolio news, delivered direct to your inbox. If you do not wish to receive these insights, you may opt-out below.

Opt-Out of Growth Insights Material

### **Privacy Policy**

ABGF is committed to protecting and respecting your privacy. We will only use the personal and business information you provide on this form in ways contemplated by our Privacy Policy, including using it to consider, process, and respond to your application, and to send you information about ABGF's investments.

By clicking Submit you consent to ABGF collecting, using, and disclosing the personal information provided for these purposes. For more detailed information, please read our Privacy Policy at abgf.com.au/privacy-policy.

Submit