

BRUNEIAN MADE INITIATIVE: Supporting and promoting locally made products

For interested applicants, kindly email this **completed form** with **photos of product(s)** to bruneianmade@dare.gov.bn or contact us at +673 238 4830 for more information

The following should be submitted along with this application form.			
Required Documents		Items Enclosed (Please tick)	Checked by DARe Officer
Registration of Companies & Business Names			
Identity Card of Business Owners			
Product Sample/s * - Please list down: *To be returned or to be purchased by DARe Officer if necessary			
Pictures of product/s (can be either in Softcopy or Hardcopy)		<input type="checkbox"/> Softcopy <input type="checkbox"/> Hardcopy	
Material Safety Data Sheet (MSDS)			
SECTION A:		COMPANY INFORMATION	
Company's Name & Address		Mobile No.:	
		Email Address:	
		Facebook/ Instagram Account:	
Contact Person Name		Designation:	
SECTION B:		PRODUCT DETAILS	
Please specify whether your product is	<input type="checkbox"/> Grocery <input type="checkbox"/> Chilled Food <input type="checkbox"/> Others: <input type="checkbox"/> General Health, Beauty & Cosmetics <input type="checkbox"/> Frozen Food <input type="checkbox"/> Handicraft, Gift & Souvenir <input type="checkbox"/> Fashion & Textile		
Brief details of product/ product range			
Target Market	<input type="checkbox"/> Low Range Income <input type="checkbox"/> Medium Range Income <input type="checkbox"/> High Range Income		
State similar product brand/s already in the market – your competitor/s			
Tell us what is special about your product (Unique Selling Point)			
List of Products	Retail Price (BND)	List of Products	Retail Price (BND)
Average Profit Margin (%)			
Capacity to produce per month			

SECTION C:		PRODUCT PACKAGING & CERTIFICATION	
Labelling (Please indicate which labels are on the products)	Mandatory	<input type="checkbox"/> Brand Name & Brand Logo <input type="checkbox"/> Product Name & Description <input type="checkbox"/> Expiry Date <input type="checkbox"/> On Packaging <input type="checkbox"/> On Sticker	<input type="checkbox"/> Barcode <input type="checkbox"/> GS1 (62/67...) <input type="checkbox"/> Halal <input type="checkbox"/> Content <i>(Weight/Volume)</i> <input type="checkbox"/> List of Ingredients <input type="checkbox"/> Information on the Manufacturer/ Distributor <input type="checkbox"/> Country of Origin
	Others	<input type="checkbox"/> Manufacturing Date <input type="checkbox"/> Product/Usage Instruction <input type="checkbox"/> Price <input type="checkbox"/> Nutrition Facts	<input type="checkbox"/> Country of Origin <input type="checkbox"/> Storage Instructions and Shelf Life <input type="checkbox"/> HSSE Indication <i>(Warning Attention: Allergies, Hazardous)</i>
Certifications Received (Please indicate)	<input type="checkbox"/> GMP <input type="checkbox"/> HACCP <input type="checkbox"/> ISO _____ <input type="checkbox"/> Healthier Choice <input type="checkbox"/> Halal _____ <input type="checkbox"/> Majlis Perundingan Kampung (MPK) Logo <input type="checkbox"/> Others (specify) _____ If none, are you working towards to have your product/s certified? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Packaging	Material Used	<input type="checkbox"/> Plastic <input type="checkbox"/> Biodegradable Material	<input type="checkbox"/> Paper <input type="checkbox"/> Glass <input type="checkbox"/> Others (specify) _____
SECTION D:		BUSINESS OPERATION	
Business Operation/ Production	<input type="checkbox"/> Home-Based <input type="checkbox"/> Central Kitchen <input type="checkbox"/> Factory <input type="checkbox"/> Retail Store <input type="checkbox"/> Office Space <input type="checkbox"/> OEM (Contract Manufacturing)		
Sales Channel(s)	<input type="checkbox"/> Home <input type="checkbox"/> Delivery <input type="checkbox"/> Store <input type="checkbox"/> Retailer (specify) _____		
Means of Marketing	<input type="checkbox"/> Website <input type="checkbox"/> Social Media (specify) _____ <input type="checkbox"/> Others (specify) _____		
Currently Exporting	<input type="checkbox"/> Yes – where? _____ <input type="checkbox"/> No – interested to export? <input type="checkbox"/> Yes – where? _____ <input type="checkbox"/> No		
Where did you hear the initiative from?	<input type="checkbox"/> DARE IG <input type="checkbox"/> Bizbrunei IG <input type="checkbox"/> DARE FB <input type="checkbox"/> Bizbrunei FB <input type="checkbox"/> DARE website <input type="checkbox"/> Bizbrunei website <input type="checkbox"/> Others: (specify) _____		

Completed by (Name)	
Designation	
Signature	
Date Submitted	

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SECTION E:	TO BE FILLED IN BY DARe OFFICER	
Product/s are suitable for	<input type="checkbox"/> Bruneian Made Supermarket Shelf (Food, Household items and Health and Beauty Products Only) <input type="checkbox"/> Unexpected Treasures Inflight Brochure (High Quality and Exclusive Products) <input type="checkbox"/> Unexpected Treasures Display in Key Locations (High Quality and Exclusive Products)	
For BM – Supermarket Shelf: Preferred Supermarkets	<input type="checkbox"/> Supa Save Mata-Mata <input type="checkbox"/> Supasave Seria <input type="checkbox"/> Sim Kim Huat Airport Mall <input type="checkbox"/> Hua Ho Tanjung Bunut	<input type="checkbox"/> Hua Ho Kiulap <input type="checkbox"/> Hua Ho Manggis <input type="checkbox"/> Hua Ho Tutong
For BM – Unexpected Treasures Display Shelf: Preferred Location	<input type="checkbox"/> Brunei International Airport <input type="checkbox"/> The Empire Hotel and Country Club	<input type="checkbox"/> Rizqun International Hotel <input type="checkbox"/> Brunei Products and Souvenir Centre
Remarks		
Completed by (Name)		
Signature		
Date Received		