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**CFP 001/03/18/2025 (application template)**

*This document serves as a formal application/proposal from an SMME to the CPAM Industry Support Programme.*

**Instructions:**

* Submit the completed application/proposal via email to:
  + Boitumelo Mabilo
  + Tel.: 012 841 4960
  + Email: [bmooketsi1@csir.co.za](mailto:bmooketsi1@csir.co.za)
* Direct any technical queries to the CPAM Technical Lead:
  + Dr Washington Makoana
  + Tel.: 012 841 4016
  + Email: [nmakoana@csir.co.za](mailto:nmakoana@csir.co.za)

**Collaborative Programme in Additive Manufacturing (CPAM)**

**2024/25 FY**

CFP 001/03/18/2025 (Application Template)

|  |
| --- |
| (Insert the title of the project here) |

Organisation:

Address:

Compiled by:

Contact person:

Telephone no:

Email:

|  |  |  |
| --- | --- | --- |
| **Signature** |  |  |
|  |  | |
| **Date** |  |  |

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# Introduction

## Organisational profile

*Please provide a brief profile about your organisation by completing the table below.*

|  |  |
| --- | --- |
| Factor | Information |
| Registered company name |  |
| Company registration number |  |
| VAT registration number |  |
| Company address |  |
| In which industry(ies) does the company mostly operate? |  |
| Company website |  |
| Company contact person name |  |
| Company contact person position |  |
| Company contact person email |  |
| Company contact person contact number |  |
| What is the company’s exposure in metal and/or polymer additive manufacturing (AM) – printing? |  |
| What is the company’s exposure in metal and/or polymer additive manufacturing (AM) – design. |  |

*Please provide B-BBEE information (include B-BBEE status and attach the B-BBEE certificate).*

|  |  |
| --- | --- |
| Factor | Level/Achievement |
| B-BBEE level (attach B-BBEE certificate) |  |
| Percentage black ownership |  |
| Percentage woman ownership |  |
| Is there any youth ownership in the company? (Y/N) |  |

## Background and motivation

*This section must demonstrate the company’s/team’s understanding of the technical problem(s) by providing a background and motivation for the support required from the CPAM industry support programme. The required information must be provided along with the completion of the table below.*

|  |  |
| --- | --- |
| **Factor** | **Information** |
| Do you have a CAD model for the part? |  |
| Is further design for AM required? |  |
| Has the material for the parts been determined? |  |
| If YES, please specify. |  |
| Has an AM technology of choice been identified, i.e. FDM, SLA, DLP, SLS, etc.? |  |
| If YES, please specify. |  |
| Will post-processing of parts be required? |  |
| If YES, please specify. |  |
| What other needs did the company identify with which the programme could assist? |  |

## Market need

*Please provide a description of how you identified the need(s) and requirements for your project within the relevant market(s), along with a clear market need and business case. This information must be provided along with the completion of the table below, which may be used as a guideline.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Factor** | **Information** | | | | |
| Which industry would be a best fit for the product? |  | | | | |
| What is the current state/progress of the product (mark with an X)? | Infancy [ ] | | Prototype [ ] | | Developed [ X ] |
| Channel for sale of the product (mark with an X)? | Direct [ ] | | Reseller [ ] | | Retailers [ ] |
| Do you have an estimated manufacturing price for the product? | YES [ ] | NO [ ] | | Price: | |
| Do you have an estimated selling price for the product to the market? | YES [ ] | NO [ ] | | Price: | |
| What is the estimated quantity per month? |  | | | | |
| Why do you feel AM is the correct manufacturing method for the product? |  | | | | |

## Project goal and objectives

*The project goal is a clear statement about what the project wants to achieve. It can be general, technical, or non-technical, but it should set a clear direction and outline the project's objectives*.

# Project management

## Description of tasks/phases

*Pl*e*ase provide a brief description of the tasks/phases required to complete this project successfully.*

## Deliverables

*Specify all deliverables/outcomes expected upon completion of the project.*

## Resource planning

*Include all resources that will be necessary to achieve your goals and objectives.*

## Schedules and costs

*Please provide an overview of the project timeline and budget.*

## Roles and responsibilities

*Division of responsibilities amongst team members and collaborators.*

## Risk management strategy

*List all the major risks associated with the project and what strategies will be put into place to minimise these risks.*

# General contracting information

## Management

Your contact persons at the CSIR are:

| Name | Contact details | Job description |
| --- | --- | --- |
| Boitumelo Mabilo | 012 841 4960/[bmooketsi1@csir.co.za](mailto:bmooketsi1@csir.co.za) | Project Admin |
| Dr Washington Makoana | 012 841 [4016/nmakoana@csir.co.za](mailto:4016/nmakoana@csir.co.za) | Technical Lead |

## Reporting

*Reporting guidelines will be provided during the contracting phase.*

# Notes and appendix

*Please provide any supporting documentation that will assist with the project proposal.*