

## **APPLICATION FOR FARMER SUPPORT**

FOR OFFICE USE:  LOCAL MUNICIPALITY REF. NO. (should link to application register)	DISTRICT MUNICIPALITY REF. NO.
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PART A: APPLICA	PART A: APPLICANT DETAILS												
SURNAME AND INIT CHAIRPERSON OF TH	TIALS OF APPLICANT / HE GROUP												
ID No. OF APPLICANT	/ CHAIRPERSON OF THE	GROUP											
RESIDENTIAL ADDRESS	FARM NAME / STREET NAME AND No.					•							
ABBINEGO	TOWN								COI	DE			
POSTAL ADDRESS (if different from	PO BOX No.												
(if different from residential address)	TOWN								COI	DE			
	TEL no.					CELI	L no.						
CONTACT DETAILS	FAX no.												
	E-mail address												
	-	·											

PART B: PROJECT DETAILS				
PROJECT NAME				
NAME OF FARM / VILLAGE NAME / COMMONAGE (if different from project name)				
ARE YOU REGISTERED ON FARMER	YES (mark with an X)	NO (m	ark with an X)	
REGISTER?	REGISTRATION NUMBER (i	Yes)		
	YES (mark with an X)	NO(ma	ark with an X)	
ARE YOU A REGISTERED ENTITY	TYPE OF ENTITY (if Yes)			
	REGISTRATION NUMBER (Attach a Business Certificate	)		
DO YOU HAVE A BUSINESS ACCOUNT	YES (mark with an X)	NO (m	ark with an X)	
DO TOO TIAVE A DOOMLOO ACCOUNT	If Yes attach the bank Statement not older than 3 months			

LOCAL MUNICIPALITY		TOWN / BUSINESS CENTRE		WARD	
GIS COORDINATES	LONGTITUDE		LATITUDE		
LOCATION OF FARM / PROJECT	THE FARM / PROJECT business centre indicated ROAD TO				(town /

NUMBER OF BENEFICIARIES (Please attach the list and certified copies of ID's of ALL beneficiaries)								
ADULTS	MALE		YOUTH	MALE		DISABLED	MALE	
ADULTS			TOOTH			DISABLED		
	FEMALE			FEMALE			FEMALE	

MILITARY VETERANS (Please attached certified ID Copy)					
MALE		DISABLED	MALE		
FEMALE			FEMALE		

RM / PROJECT RESO	URCE DESCRIPT	ION			
FARM SIZE	На		RIVER		
ARABLE LAND		WATER SOURCE (mark	SPRING		
CRAZING LAND	Ца	with an X)	DAM		
GRAZING LAND	Па		BOREHOLE(S)		
ELECTRICITY SOURCE( Yes/No)				NO (mark with an X)	
			ESKOM GRID		•
			RENEWABLE ENERGY		
MACHINERY, EQUIPMENT, IMPLEMENTS AND TOOLS				QUANT	ΊΤΥ
	FARM SIZE  ARABLE LAND  GRAZING LAND  Y SOURCE( Yes/No)	FARM SIZE  ARABLE LAND  Ha  GRAZING LAND  Ha  Y SOURCE( Yes/No)  TYPE  TYPE	FARM SIZE  ARABLE LAND  Ha  WATER SOURCE (mark with an X)  HA  YES (mark with an X)  ESKOM GRID  RENEWABLE ENERGY  TYPE  TYPE	FARM SIZE  ARABLE LAND  Ha  GRAZING LAND  Ha  WATER SOURCE (mark with an X)  PARM BOREHOLE(S)  YES (mark with an X)  ESKOM GRID RENEWABLE ENERGY  TYPE  TYPE	FARM SIZE

PART D: FARMER CATEGORY (Mark with an X)					
SUBSISTENCE HOUSEHOLD					
SUBSISTENCE PROCUDER (Turnover < R50 000 per annum)					
SMALLHOLDER (Turnover > R50 000 per annum)					
COMMERCIAL (Turnover > R20 000 0000 per annum)					

PART E: LAND OWNERSHIP / SECURITY OF TENURE (Please attach title deed, proof of allocation of land by Traditional Authority, lease agreement, approval by municipality to utilize commonage land, etc. whichever is applicable) (mark with an X)

LAND REFORM	COMMUNAL	COMMONAGE	
PRIVATELY OWNED	LEASED	OTHER (please specify)	

PART F: COMMODITY INFORMATION (Mark with an X)					
AQUACULTURE		FORESTRY		POULTRY	
CHICORY		GRAIN		RED MEAT	
CITRUS FRUIT		MOHAIR		TROPICAL FRUIT	
DECIDUOUS FRUIT		NUTS		VEGETABLES	
DAIRY		PIGGERY		WOOL	
FODDER		PINEAPPLE		OTHER (please specify)	

PART G: SUPPORT REQUIRED		
G1: ON / OFF FARM INFRASTRU	CTURE (Mark with an X)	
Fencing: Boundary	Bulk water supply structures	Poultry production facility
Internal / camp fencing	Multipurpose shed	Largestock handling facility
Arable land	Shearing shed	Smallstock handling facility
Dipping facility	Pack shed	Sales pen / marketing facility
Stock water reticulation	Storage facility	Agro-processing
In-field irrigation structures	Pig production facility	Other (please specify)

Infrastructure Commodity.	G2: SA GAP support Infrastructure	Commodity:
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G3: INTEGRATED CROPPI COMMODITY	Ha avail	able	Ha to be cul					
	uvuli		NO OU	ltivated	SUPPO	RT REQUIRED (Mark with	 an X)	
						tion Inputs		
						nization		
					Produc	tion Inputs		
						nization		
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G4: ILIMA LOKULIMA				,		T		
PRODUCTION INPUTS FOR		VEGETA	BLES			GARDENING EQUIPMENT		
		POULTR	Y PACK			OTHER (please specify)		
		PIGGER	Y PACK					
		BEES						
G5: GENETIC IMPROVEME	ENT			L		I	I	
NATURE OF REQUEST (Ca	attle, sh	eep and	d goats)					
ANIMAL CLASS			QUANT	ITY		TYPE OF BREED		
Cattle: Bulls								
Heifers								
Sheep: Rams								
Ewes								
Goat: Bucks (Rams)								
Does								
G6: POULTY PRODUCTIO	)N							
NATURE OF REQUEST (Choose either Layers, Broilers or Chickens)	Indigenou	s	QUANT	TTY				

Broilers					
Indigenous Chickens					
Chicken Feed (Number of bags –kg)					
Medicine					
G7: PIGGERY PRODUCTION					
NATURE OF REQUEST					
ANIMAL CLASS		QUANTITY		TYPE OF BREED	
Sows					
Boars					
Pig Feed (Number of bags - kg)					
Medicine					
G8: LANDCARE		l		ı	
Soil conservation works			Conserva	ation agriculture	
Eradication of alien invasive species			Water ha	rvesting	
Junior LandCare		Other (please specify)		ease specify)	
We, the undersigned, certify that the information, facts and representations given above are true and correct.	su	RNAME AND	INITIALS	SIGNATURE	DATE
Farmer / Applicant / Chairperson of group					
Extension officer					
Control Technician					

Layers

FOR OFFICE USE:	RECOMMENDATIONS AND APPROVAL
PROJECT REF. NO.	
PROJECT NAME	
DISTRICT	
RECOMMENDE	D / NOT RECOMMENDED
Alice 1	
DATE:	Screening Committee (Deputy Director: Coordination)
DATE:	
APPROVED/ NO	
APPROVED/ NO	T APPROVED