

Ministry of Agro-Industry And Food Security
Head Office - Port-Louis - Land Conversion Unit

Application for Land Conversion Permit

Note: Prior to filling the form, read carefully paragraph 8.

To be submitted in Original

1. Main Applicant's Details

NID:	1 5 10 14	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Sex:	1 6	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Date of Birth:	1 5 10	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Title:	1 6	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Applicant Type:	1 5 10	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

(Company/Society/Individual/Co-Owner/Heirs/etc...)

NOTE: For Individual, Co-Owners, Heirs, etc.,, Enter Surname and Other Names of Main Applicant;

For Companies, Society, Govt, etc... Enter Company name and that of the Director or his representative.

Surname:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Other Names:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Company Name:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Director:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Flat/Block/Appt No:	1 6 10	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Street No/Name:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Locality:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Town/Village:	1 5 10 15 20 25 30	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

Post Code:	1 6	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>					Tel No:	1 5 7	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>					Fax No:	1 5 7	<table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				

E-Mail: Mobile No.

2(i) Details of Land to be converted

Street/Road:

Locality:

District:

Transcription No. of Title Deed: TV No. Deed Date:

Area as per Title Deed: M²

Area to be converted: M²

2(ii) Present Cultivation - Is land to be converted presently under cultivation of sugar cane, tea or tobacco? (✓ for Yes)

If yes, then fill in the following:-

Location	SIFB A/C No	Factory Area	Tea Board	Tobacco Board
.....

2(iii) Past Cultivation - If land is not presently under cultivation, has it been under cultivation in the past. (✓ for Yes)

Location	SIFB A/C No	Factory Area	Tea Board	Tobacco Board
.....

Date last harvested:

Name of present owner:

2(iv) Is the Land to be converted in an irrigation area? (✓ for Yes)

2 (v) Does the Land form part of land which was subdivided for agricultural purpose? (✓ for Yes)

3. Land Details - Larger Plot and Other uses of agricultural land

(a) Did land to be converted form part of a larger plot as at 01 January 1981? (✓ for Yes)

Name of Owner of larger plot:

Area of larger plot: M²

Was the land excised or sub-divided for agricultural purpose? (✓ for Yes)

Date of excision/sub-division:

For Official Use Land Category:

4. Have you put any agricultural land to other uses in the past? (✓ for Yes)

If yes, please indicate area converted, location, TV No. and land conversion tax paid (if applicable) and reference no. of your previous application:

5. Do you wish to be exempted from payment of Land Conversion Tax in accordance with any provision of section 29 of the SIE Act 2001 (copy of relevant extract is attached). (✓ for Yes)

If yes, please specify relevant subsection

6 Applicant/s to give an indication of the purpose of conversion

- A. Residential (i) (a) own use)
(b) subdivision among)
(i) heirs)
(ii) ascendant/descendant) Tick as appropriate (✓ for Yes)
(iii) co-owners)
(c) morcellement)
(d) others)

If conversion is for (b) please submit names, ID Number and lots allocation and indicate whether beneficiaries are owners of a residence or a residential plot of land elsewhere.

(ii) Are you already the owner of a residence? (✓ for Yes)

(iii) Are you the owner of any other residential plot of land? (✓ for Yes)

B. INDUSTRIAL (Specify the type of industry):-
(Clearance of the Ministry of Industry should be attached)

C. TOURISTIC (Specify type of development):-
(Clearance of the Ministry of Tourism should be attached)

D. AGRO INDUSTRIAL (Specify type):-
(EIA & Health clearances as well as project write up should be submitted)

E. APPROVED HOUSING SCHEME (Give details):-
(Whether a housing development company or a scheme in favour of workers of a sugar factory)

F. COMMERCIAL (Specify type):-

G. OTHERS (Specify): -

7. DECLARATION

I HEREBY DECLARE THAT ALL PARTICULARS GIVEN IN THIS APPLICATION FORM AND IN THE DOCUMENTS ANNEXED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I HAVE NOT WILLFULLY SUPPRESSED ANY RELEVANT INFORMATION.

8. NOTE

- (1) This Ministry will not consider applications where
 - (a) application forms are not properly filled
 - (b) information is missing or inaccurate
 - (c) all relevant documents including clearances are not submitted along with the application forms and
 - (d) the site/location plan does not satisfy conditions as per Registration Duty Act and International System of Units (SI Units).

Signature of Main Applicant:

Date:

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Ministry of Agro-Industry and Food Security
 9th floor Renganaden Seeneevassen Building
 Port-Louis
 Tel No 212-0854 (Ext 2015)

9. For Official Use (Data to be input in the computerised system)

Applicant Id:

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Application No:

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File Ref No:

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Scheme :

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Main Purpose of Conversion:

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Sub Purpose of Conversion :

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Purpose Remarks

Form Verified by: Grade: Date:

Data Captured by: Grade: Date:

In case there are co-applicants/co-owners, please fill in the additional page(s)

Co-Applicants Details

1. NID:

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 Surname:

Other Names:

Are you owner of a residence or a residential plot of land? (✓ for Yes)

Tel No: Signature:

2. NID:

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 Surname:

Other Names:

Are you owner of a residence or a residential plot of land? (✓ for Yes)

Tel No: Signature:

3. NID:

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 Surname:

Other Names:

Are you owner of a residence or a residential plot of land? (✓ for Yes)

Tel No: Signature:

4. NID:

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 Surname:

Other Names:

Are you owner of a residence or a residential plot of land? (✓ for Yes)

Tel No: Signature:

5. NID:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Surname:

Other Names:

Are you owner of a residence or a residential plot of land? (✓ for Yes)

Tel No: Signature:

