

**MINISTRY OF AGRO INDUSTRY AND FOOD SECURITY  
FOOD AND AGRICULTURAL RESEARCH AND EXTENSION INSTITUTE (FAREI)**

**SHELTERED FARMING SCHEME**

**Category:**      **Individual**          **Company / Association/ Cooperative Society**     

1. Name of applicant:.....

2. Represented by:..... In capacity of:.....

3. Date of registration of organisation with relevant authorities: ...../...../.....

4. S.F.W.F. Card Number:..... Gender: Male Female Age.....

5. I.D. Number of farmer or representative of Company/Association/Cooperative Sty.: 

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6. Postal Address:.....  
.....  
.....

7. Telephone Number:..... Mobile Number:..... Fax Number:.....  
E-mail address:.....

8. Farm/Business address:.....  
.....  
.....

9. Status: Owned  Leased Lease period: From..... to.....

10. Crops to be grown:.....

11. Area under cultivation in 2013:.....ha (.....Arpents)

12. Number of years of experience in business:.....Years

13. Type of structure purchased: Locally Mounted Area:.....m<sup>2</sup> Imported Area:.....m<sup>2</sup>

14. Have you followed a training at FAREI on sheltered Farming Yes No

15. Name of Supplier(s)/Contractor:.....

16. Address of Supplier(s)/Contractor:.....  
.....  
.....

17. Total cost (in words): Rupees.....  
 .....  
 18. Amount applied for (in words): Rupees.....  
 .....  
 19. Please attach any relevant documents to support your application

I .....certify that above information given is true and correct.

Signature:.....

In capacity of:.....

Date of submission of application to FAREI:...../...../.....

Office: .....

**For Office Use Only**

No	Item (Photocopies)	Submitted	Not Submitted	Remarks
1	N.I.D/Business Card/Registration Certificate			
2	Copy of National Identity Card for members			
3	Site and location plan			
4	Quotation from Supplier			
5	Quotation from Contractor			
6	SFWF Card Number			
7	Invoices			
8	Title Deed/Lease Agreement			
9	Copy of Permit /Licenses			
10	Proof of funding			
11	FAREI field report			

Name of Extension Officer:..... Signature:.....

Date application received:...../...../..... Office:.....

Date application submitted to Evaluation Committee:...../...../.....