

## NATIONAL AGRICULTURAL MARKETING BOARD HORTICULTURE INPUT SUBSIDY APPLICATION FORM

FUR	-OR OFFICE USE					
AP	PLICATION NO:					
DA	ATE RECIEVED:					
1.	FULL NAME &	TITLE OF APPLICANT				
2.	FULL NAME OF	COMPANY/ COOPERATIVE (IF REG	STERED)			
3.	IDENTITY NUM	IBER (PIN)/ COMPANY NUMBER (CC	OMPULSORY)			
4.	ARE YOU CURR	RENTLY OPERATING? (TICK WHERE	APPROPRIATE)	YES	NO	
5.	POSTAL ADDRE	ESS				
6.	CELL NO	TEL NO	E 1	MAIL		
7.	PHYSICAL ADD	RESS				
8.	REGION	INKHUNDLA		. CHIEFDOM		
9.	NATIONALITY .		GENDER (Male/F	emale)		
10.	WHAT TYPE OF	CROPS ARE YOU CURRENTLY PROD	DUCING?			
11.	HOW LONG HA	AVE YOU BEEN PRODUCING THESE (	CROPS?			
12.	HAVE YOU DO	NE ANY PRODUCTION TRAINING ON	N HOW TO MANAGE TH	HESE CROPS?	IF YES, PLEASE	
	STATE THE NAI	ME OF THE ORGANIZATION THAT P	ROVIDED THE TRAININ	G		
	ANY OTHER TR	AINING?				
13.	HOW MUCH A	REA ARE YOU INTENDING TO PLANT	UNDER THE SUBSIDY	PROGRAMME?		



## 14. **SUBSIDY REQUESTED**: PLEASE TICK THE PROPOSED CROP AND FILL IN THE TABLE BELOW.

Tick selected crop	Commodity	Allowable Costs / ha	Indicate Area	Total Costs	Farmer's Contribution ( 60%)	NAMBoard's Contribution (40%)
	Potatoes	49 200				
	Onion	31 700				
	Carrot	48 800				
	Tomatoes	58 400				
	Beetroot	27 400				
	Green Beans	34 680				
	Peas	40 000				
	Baby Corn	21 450				
	Chilies	37 900				
	Cucurbit	29 800				
Total						

TOTAL AMOUNT REQUESTED FROM NAMBOARD IN WORDS:	

## 15. DOCUMENTS CHECK LIST (Make sure you provide the following documents)

Item	Please tick	Item	Please tick		
1. Age: 18 years or above		2. Certified copy of identity document			
3. Land Right (Chief's letter, lease, title deed)		4. Proof of Market (Contract, letter of intent)			
5. Cash flow projections		6. Soil analysis report and fertilizer recommendations			
7. Water right (where applicable)		8. Availability of technical expertise			
9. Irrigation system if available		10. Land is fenced			
11. Area applied for between 1 ha and 5 ha					
For Companies/ Cooperatives and Trusts (including the above)					
12. Legally Registered		13. Certified copy of form J (if applicable)			
14. Certified copy of Certificate of Incorporation or registration certificate		15. Memorandum and Articles of Association or By Laws			
16. Certified I D copies for all directors					



## 16. **DECLARATION BY APPLICANT**

any request for information made by NAMI	Board or her partners as part of the assessment. I/We further confirm tha e best of my knowledge and can be relied upon.
SIGNATURE OF APPLICANT:	
17. RECOMMENDATION FROM MARKET E	EXTENSION OFFICER (MEO)
I confirm that	is a farmer/ an aspiring farmer based a
and does have good access to water for irri	gation. The land to be utilized is suitable for the crops intended, therefore
I recommend that he/she be granted the i	nput subsidy.
NAME & SURNAME:	DATE:DATE:
18. SUBSIDY APPROVAL	
Reviewed by : Development Manager	
Authorised by: Chief Operations Officer	
Authorised by : Chief Financial Officer	
Authorised by: Chief Executive Officer	