

**SMALL FARMERS WELFARE FUND**

**APPLICATION FOR CONCESSIONARY RATES ON ROAD TAXES FOR BREEDERS**

1. DATE:                    /                    /

2. SURNAME: \_\_\_\_\_

3. OTHER NAME: \_\_\_\_\_

4. ID NO:

5. ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

6. TEL NO:

7. MOBILE NO:

8. FARM ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

9. RENTED:  (Acreage:.....)                    OWNED:  (Acreage:.....)

10. Types of Breeding	Cattles	Fattening pigs	Sows	Goat/Sheep	Rabbit	Honey Bees
Number of Heads						

11. DATE ROAD TAX EXPIRES: \_\_\_\_\_

12. NAME OF REGISTERING OFFICER: \_\_\_\_\_

**OFFICE USE:**

1. REG NUMBER: \_\_\_\_\_

2. DATE REG: \_\_\_\_\_

3. CERTIFIED:   
Date: \_\_\_\_\_

NOT ELIGIBLE:   
Date: \_\_\_\_\_

PENDING:   
Date: \_\_\_\_\_

**NOTE:** The registering officer should clearly read the lease/bail paper or contract of the breeder before filling the form, and volume number. Attach a copy of bail/lease paper or contract of the breeder.

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**1. Applicant**

1.0 SFWF REG. No.

2.0 ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

3.0 PHONE NO:

**2. Particulars of Animal**

SN	Tag No.	SN	Tag No.
1		11	
2		12	
3		13	
4		14	
5		15	
6		16	
7		17	
8		18	
9		19	
10		20	

Additional Tag No.:.....

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3. Declaration: I Mr./Mrs. .... warrant that the above information provided in every respect is true and correct and I have not withheld any information likely to affect the acceptance of this application.

4. Signature of Applicant:.....

5. Name of Registering Officer:.....

6. Date: ...../...../.....