SMALL FARMERS WELFARE FUND <u>APPLICATION FORM FOR CONCESSIONARY RATES ON ROAD TAXES</u> <u>PLANTER</u>



SECTION I: (To be completed by Registration Officer)

1.	DATE:	/	/				
2.	SURNAME:						
3.	NAME:						
4.	ID NO:						
5.	ADDRESS:						
7.	TEL NO: MOB NO: FIELD ADDRESS:						
			VEGETABLES	FRUITS	ACREAGE		
		OWNED					
		RENTED					
	TOTAL ACREAGE						
9. MONTH ROAD TAX EXPIRED:							
10. NAME OF REGISTERING OFFICER:							
SECTION II: To be completed by Welfare Assistant:							
1. REG NO: 1.1 DATE REG:///							
2.	2. CERTIFIED: 2.1 NOT ELIGIBLE: 2.2 PENDING:						
3. REMARK/S:							
4. NAME OF OFFICER:							
5. SIGNATURE:							
6.	6. DATE VISITED:/						

NOTE: The Registration officer should read the title deed/lease agreement, including the volume number, of the breeder before filling the form. A copy of the title deed/lease agreement, including the volume number, of the breeder to be attached with the application form.