**SMALL FARMERS WELFARE FUND**

**REGISTRATION OF POTENTIAL SUPPLIERS OF AGRICULTURAL LAND MECHANIZATION SERVICES**

1. **NAME OF SUPPLIER**:………………………………………………………………..

**2. ID/COMPANY REGISTRATION NO:**………………………………………………

**3. ADDRESS**:……………………………………………………………………………..

**4. CONTACT PERSON**:………………………………………………………………….

**5. CONTACT NO**: …………………………………………………………………………

**6. VAT REGISTRATION NO. (Where applicable)**:……………………………………

**7. BUSINESS REGISTRATION NO**:……………………………………………………

8. We are hereby applying for registration as potential supplier providing Agricultural Land Mechanization Services for the following operations:

|  |  |
| --- | --- |
| **Technical Terms** | **Tick as appropriate** |
| Ripping (Routé) |  |
| Raking (Pass Peigné) |  |
| Furrowing (Silloné) |  |
| Disk ploughing (Disqué) |  |
| Bulldozing (Bulldozé) |  |
| Derocking |  |
| Rock removal and carting away (Tire roche) |  |
| Bed forming (Fer plate bande) |  |
| Excavation (Fer drain) |  |
| Other agricultural operations and related works (e.g construction of field drainage systems) |  |
| To be listed by supplier\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**9. Type of Tractor and Implements owned by the supplier**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **SN** | **Equipment** | **Number** | **Type**  | **Make and Model** | **Capacity** | **Age** | **Remarks** |
| 1 | Crawler Tractor |  |  |  |  |  |  |
| 2 | Wheel Tractor |  |  |  |  |  |  |
| 3 | Other type of machinery (Please specify) |  |  |  |  |  |  |
| 4 | **Implements / Accessories** |  |  |  |  |  |  |
| 5 | Rake (please specify distance between tines) |  |  |  |  |  |  |
| 6 | Ripper |  |  |  |  |  |  |
| 7 | Disk |  |  |  |  |  |  |
| 8 | Furrower (please specify number per tractor) |  |  |  |  |  |  |
| 9 | Other equipment |  |  |  |  |  |  |

10. We are hereby enclosing copy of Business Registration Number and VAT registration Certificate (where applicable) to conduct the above operations.

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**Signature of Applicant Date**

**Seal of Applicant**

**(If available)**