



Small Farmers Welfare Fund

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APPLICATION FORM

- SUBSIDY FOR AGRICULTURAL MECHANISATION SCHEME (SAM) -

Serial No.: SAM/...../...../26-27

SECTION 1:-

1.1 Planter's Details:

Mr ☐ Mrs ☐ Miss ☐ SFWF Reg No.:

a) Surname: _____

b) Name: _____

c) Tel No: / Mob No:

d) ID No.:

e) Bank A/C No.: (if available) / Bank Name: _____

Documents submitted:

- Site Plan ☐
- Copy of title deed/lease agreement ☐
- Receipt from Service Provider ☐
- Proof of Bank A/c no. ☐

SECTION 2:-

2.1 Field Information / Particulars of work/s:

S N	FIELD/S ADDRESS	O/ L*1	ACREA- GE (ARPENT)	CROP/S TO BE GROWN	AGRICULTU- RAL MECHANISA- TION WORK/S CONDUCTED (Choose from below codes ²)	WORKS CONDUCTED ON	WORKS CONDUCTED BY	RECEIPT NO. / DATE	TOTAL COSTS OF WORKS (Rs/arp)	TOTAL AMOUNT OF SUBSIDY REQUESTED (@ Rs 3,000/arp)	OFFICE USE		REMARKS
											TOTAL ACREAGE CERTIFIED	MECHANISATIO- N WORK COMPLETED YES NO	
1	Pin code ³ :												
2	Pin code ³ :												
3	Pin code ³ :												

1. *1 Own/leased

2. *2A :Routé

*B: Silloné

*C: Disqué

* D: Fer plate bande

*E: Fer drain

*F: Lezot operation agricole

3. *3 To provide Pin Code number where available

2.2 I, Mr/Mrs/Ms the undersigned, hereby declare that all the above information/documents provided and quantum of subsidy requested are true and correct to the best of my knowledge and that I have fully understood all the terms and conditions attached herewith and I also affirm that the supplier/s of mechanization services mentioned above has/have undertaken the said mechanisation works on my field/s to my satisfaction.

2.3 I affirm that

- (i) The works have been done strictly within the boundaries of my land and that the SFWF would not bear any liability if there is any dispute arising from third party.
- (ii) The land mechanized will be used solely for crop production.

2.4 I have noted that,

- (i) Payment of the subsidy applied for will be effected only after site visit/s made by the officers of the SFWF certifying that, the mechanization works, has/have been conducted satisfactorily on the said field/s.
- (ii) In case, I have provided inaccurate information and/or have tampered with the system, I will be disqualified from all Schemes, including the Subsidy for Agricultural Mechanisation, as provided by the Small Farmers Welfare Fund (SFWF).

2.5 Name of Applicant:

2.6 Signature:

2.7 Name of Registering Officer:

2.8 Signature:

2.9 Date:/...../.....

SECTION 3:- OFFICE USE

3.1 Field visited by:
(Name of SFWF Officer)

3.2
(Signature of SFWF Officer)

3.3 Application certified as: ELIGIBLE: ☐ NOT ELIGIBLE: ☐

3.4 Remark/s:

3.5 Date:/...../.....

3.6 Verified by:
(Name of SFWF Officer)

3.7
(Signature of SFWF Officer)

3.8 Date:/...../.....

3.9 Certified by:
(Name of SFWF Officer)

3.10
(Signature of SFWF Officer)

3.11 Date:/...../.....

3.12 Remark/s:

APPROVAL FOR PAYMENT

3.13 Approved / Not Approved by (tick as appropriate)
☐ ☐

3.14 Remark/s:

3.15 Authorize signature:

3.16 Date:/...../.....