Region code ☐☐ / ☐☐☐☐☐

SMALL FARMERS WELFARE FUND
2nd Floor, MCIA Building, Saint Pierre
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Email: info@sfwfund.com Website: sfwf.govmu.org
BRN: F11000021

APPLICATION FORM
Fertiliser Subsidy Scheme (FSS)

☐☐☐☐☐
Office Use

Serial No.: FSS/_____/_____
(Office Use)

SECTION1: -

1.1 Planter's Details:

Mr ☐ Mrs ☐ Miss ☐ SFWF Reg No.: ☐☐☐☐☐☐

a) Surname: _____

b) Name: _____

c) Tel No: ☐☐☐☐☐☐☐ / Mob No: ☐☐☐☐☐☐☐☐

d) NID No.: ☐☐☐☐☐☐☐☐☐☐☐☐☐

1.2 Type of Agricultural Activity:

SN	Type of Agricultural Activity	Tick accordingly
1	Open Field	☐
2	Hydroponics	☐

Documents submitted:
- Site Plan ☐
- Copy of title deed/lease agreement ☐

SECTION 2: -

2.1 Field Information (Open field):

SN	FIELD LOCATION	O/L*1	ACREAGE/ (ARP)	CROP/S	CROP/S STAGE/S	NAME OF APPROVED SUPPLIER/S	TYPES OF FERTILISER
1							
2							
3							

*1 Own/Leased

2.2 Field Information (Hydroponics):

SN	FIELD LOCATION	O/L*1	Square Metre (250-500)	CROP/S	CROP/S STAGE/S	NAME OF APPROVED SUPPLIER/S	TYPES OF FERTILISER
1							
2							
3							

*1 Own/Leased

3.0 Declaration:

(i) I…….. am hereby applying for a fertilizer subsidy under the Fertiliser Subsidy Scheme (FSS) for FY 2026/27 for the above field/s, acreage, crop/s and types of fertiliser/s. I declare and warrant that the above information provided by me in every respect is true and correct and I have not withheld any information likely to affect the acceptance of this application.

(ii) I have also been informed that quantum of subsidy that will be provided to me will be calculated on the types of crop, acreage cultivated and type/s of fertiliser/s required taking into consideration relevant recommendations for the utilisation of fertiliser as made by the FAREI in the Guide Agricole (2019) for **0.10 arpent up to a maximum of five (5) arpents** for open field and/or **250m² up to a maximum 500m²** for protected culture, provided I submit all relevant land tenure documents, where available. I have also been informed that necessary technical advice should be sought from the Food and Agricultural Research and Extension Institute (FAREI) - (vegetables, fruits and ornamentals) for the utilization and application of the fertiliser on my field/s and supplier of fertiliser.

(iii) I acknowledge and agree that the fertiliser subsidy shall be provided for one (1) crop cycle only during the Financial Year 2026/27. **I have been made aware that for the Financial Year 2026/27 the subsidy will be provided in chronological order based on the date of receipt of applications, with priority given to planters who have not received the subsidy in Financial Year 2025/26 and subject to the availability of funds and the availability of the required products from suppliers. The completion of this application form does not necessarily warrant that the subsidy will be made available to me.**

(iv) **I also have no objection that my given contact details be submitted by the SFWF to the supplier for the planning and delivery of allocated fertiliser to me. I further acknowledge that vouchers not collected at the respective sub office within 2 weeks will be returned to the Head Office. An additional two weeks period will be granted to me for collection of same at the Head Office, after which the voucher will be cancelled.**

3.1 Name of Applicant: ……..……..……..

3.2 Signature: ……..……..

3.3 Name of Registering Officer: ……..…..…

3.4 Signature: ……..…….

3.5 Date: ……/……/……

SECTION 4:- OFFICE USE

4.1 Head Office

Received by: …… (Name of Officer) …… (Signature of Officer)

4.2 Certified by FAREI: ……..…… (Name of FAREI Officer) **4.3**……..……. (Signature of FAREI Officer)

4.4 Application certified as: ELIGIBLE: ☐ NOT ELIGIBLE: ☐

4.5 Remark/s: …….....……

4.6 Date: ……./……/…….

4.7 Field visited by: ……..…… (Name of SFWF Officer) **4.8**……..……..… (Signature of SFWF Officer)

4.9 Field visit Report Attached: ☐ * Yes ☐ * No

4.10 Remark/s: …….....……...

4.11 Date: ……/……./…….

* Please tick as appropriate