GOVERNMENT OF GOA
DIRECTORATE OF ANIMAL HUSBANDRY & VETERINARY SERVICES,
PATTO, PANAJI – GOA

APPLICATION FORM FOR INCENTIVE UNDER GREEN FODDER CULTIVATION SCHEME (Perennial/Seasonal)

1) Full name of the applicant

.......................................................................................................................... (IN BLOCK LETTER) Surname First name Father’s/Middle name

2) Permanent address: a) House No.………… b) Ward ........................

c) Village ..................... d) Taluka ........................

e) Constituency :-............. f) Telephone/Mobile No………………

3) Category: ST/SC/General (In case of SC/ST – Certificate to be produced)

4) Educational Qualification:.................................................................

5) Employed/Unemployed:.................................................................

6) Size of land holding as per form 1 & XIV records (Documents should be attached) .................................................................

7) Proposed land area for Perennial/Seasonal fodder cultivation ............sq. mts. Seasonal fodder cultivation proposed variety of green fodder cultivation and the area ........sq. mts.

8) Whether willing to execute a Bond as per scheme pattern.................

9) Documents to be attached.

   a) Form 1 and XIV

   b) Affidavit in prescribed format or N.O.C. from the Landlord or copy of land ownership documents.

   c) Passport size photograph of the applicant/Leader.
CERTIFICATE OF FARMER

I hereby certify that I have read the entire scheme containing its rules, regulations and guidelines. I hereby agree to abide by them and any changes which the Government may like to make from time to time. I further certify that all information given by me is true to the best of my knowledge and belief and also agree that in case it is found false that I shall be liable for any action as Government may find it fit and appropriate to impose upon me.

Date: __________________________

Signature of the Applicant
before Assistant Director/V.O

Full Name
Address

Countersigned by
Assistant Director/
Veterinary Officer

FOR OFFICE USE ONLY

(Form to be verified and recommended within 8 days of receipt of application)
INSPECTION REPORT

Certified that I have personally visited the site of proposed plot of land for green fodder cultivation and found that the information given above is correct and that the beneficiary is having the irrigation/water supply facilities for the proposed land area under cultivation and hence the proposal is recommended for incentive benefit under perennial green fodder/seasonal fodder cultivation. All the records of green fodder cultivation such as follow-up of inspections of fodder plots, the exact area of cultivated land, period of fodder cultivation etc will be maintained in this office register.

I am satisfied/not satisfied with the area and location of plot. I recommend/not recommend the project.

Signature of the Concerned Veterinary Officer/Assistant Director
With his Remarks & date

Place :-
Date:-
This is to certify that we have visited and inspected on this day ............ Of .................. 20........ the Perennial/Seasonal Fodder plot cultivated by the beneficiary.

Shri./Smt........................................... r/o .................................................. with following particulars.

1) Address of the cultivated land :- ________________________________

2) Land area cultivated: - ________________________________

3) Type of fodder grown and its stage of growth :- ________________________________

4) No of Cutting :- ________________________________

5) Quantity of the fodder harvested :- ________________________________

6) Approval letter number with date :- ________________________________

7) Dates of cultivation :- ________________________________

8) Photograph of the fodder plot along with farmer and day’s newspaper: - ________________________________

The proportionate biannual/ annual incentive as per the terms and condition of the scheme may please be released to the beneficiary. The agreement Bond on stamp paper signed by the beneficiary is enclosed herewith/ has been submitted with 1st Semester report.

Extension Officer
Veterinary Dispensary/ Veterinary Hospital

Signature of the concerned Officer with date