Ref. Code: SPCR/	/ /	
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## MINISTRY OF AGRO-INDUSTRY AND FOOD SECURITY FOOD AND AGRICULTURAL RESEARCH AND EXTENSION INSTITUTE (FAREI) APPLICATION FORM: SOLAR POWERED COLD ROOM SCHEME 2024/2025

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Su	Surname: Mr/ Mrs/Ms Name:											
Na	ame of As	sociation/Co	operative	:/Compan	ıy:			 			 	
Da	ate of regi	stration of o	ganisatio	n with re	levant au	thorities:		 /				
SF	FWF regis	tration card	number:			Ag	ge:					
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Tele		mber:										
	m / busine	ss address:										
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Farn Land Land	d tenure: d area occ	ss address:  Owned   upied:  s in farming	Leased business:	d□ Lea arpent/i	se period	d: From		 	t	 :O	 	

14.	Address of supplier(s):							
15	5 Estimated cost of equipment being acquired: Rupees							
16	Amount of cash grant applied for : Rupees							
17	Declaration:							
	I	here	by certify that all inf	formation given in this				
	ication form is true, correct and complete in ever							
	Signature:	<u></u> Ir	capacity of:					
<u>.</u>	Date of submission of application to FAREI:/ Please note that this application will not be produced below.	cessed in case o	f failure on your par	t to submit any of the				
]	For Office Use Only							
No	Item (Photocopies)	Submitted	Not Submitted	Remarks				
1	N.I.D/business card/registration certificate							
2	Copy of National Identity Card for members*							
3	Copy of resolution for approval of project*							
4	SFWF card							
5	Detailed quotation from supplier/contractor							
6	Title deed/lease agreement							
7	Location plan of project site							
8	Permit /licences, if applicable							
9	Sketch/design of project							
10	Proof of funding							
11	FAREI field report							
	* for cooperatives/associations							
Nan	ne of Officer:	Si	gnature:					
Date	e application received:/	0	ffice:					
Ack	nowledgement Receipt delivered on:	Appli	cant Signature:					