

APPLICATION FORM FOR INTEGRATED POST HARVEST MANAGEMENT COLD AND CA STORAGE

To

The Deputy Director of Horticulture

Distt. _____ HP

Subject: Application for construction/modernization/expansion of cold/CA storage under Integrated Post Harvest Management component of MIDH.

1. Name

Permanent Address

Postal Address

2. Constitution

In case of Individual

3. Category

4. Gender

5. Occupation

6. Promoters/beneficiary profile:

In case of companies

Registration Number & Date of Registration

- Registering Authority
- Act under which registered
- Authorized share capital
- Paid up share capital
- Reserve and surplus
(By end of last financial year)

The proposed Activity _____ is located at survey /Khasra No. _____

Village _____ Taluka _____, District _____

H.p.

Component for which Assistance is requested

In case of expansion of Existing capacity of _____ storages, Chamber(s) capacity in MT

Chamber No.1. _____

Chamber No.2 _____

Chamber No.3 _____

Chamber No.4 _____

Total _____

In case of proposed new establishment of _____ storages Chamber(s) Capacity in MT

Chamber No.1 _____

Chamber No.2 _____

Chamber No.3 _____

Chamber No.4 _____

Total _____

In case of modernization of _____ storages Chamber (s) Capacity in MT

Chamber No.1 _____

Chamber No.2 _____

Chamber No.3 _____

Chamber No.4 _____

Total _____

Justification for Additional Capacity /Modernization

a) Whether the proposed activity in application is Yes/No a completely a new activity **(if No,the details of preexisting activity or any component thereof included in the application should be indicated clearly)**

b) Whether any subsidy has been availed Yes/No for the proposed proposal/activity from Central Govt. or any of its Agencies (If Yes, please indicate clearly in detail)

PROPOSED PROJECT COST (Component wise)

1.

2.

PROPOSED MEANS OF FINANCE

- i) Promoter's Share
- ii) Bank/FI term loan
- iii) Proposed subsidy from other sources ,if any
 - a) From State Govt.
 - b) From Central Govt. other than NHB

TOTAL

Whether any assistance in the form of soft loan and subsidy has been availed by the beneficiary earlier from any other Govt. Agency. If yes, give details thereof.

- i) MFPI
- ii) APEDA
- iii) NHB
- iv) Technology Mission

Name of the bank /FI from where the term loan is availed /to be availed by the Beneficiary (Please enclose a copy of the duly filled up term loan Application).

- a) Name of Bank
- b) Details of Bank Branch
- c) Bank code

Date & Amount of sanction of term loan, if any

Details of release of term loan, if any

DETAILS OF LAND

- I) Whether own land (ancestral)
- II) Whether own land purchased
- III) Whether leased if so, how many years lease

Whether lease /tenancy /contract is registered with the competent Registration Authority (copy of the proof of each title be enclosed)

Name &Address of consultant who prepared the project report (DPR).

Certified that the information /contents as above furnished by me/us in the application are true to the best of my/our knowledge &belief and nothing material has been concealed. In case, any information furnished in the application is found false, my /our application may be rejected out rightly at any stage by the department.

(Signature of the Beneficiary)

Place

Name & Address

Date

Telephone /Fax No.