

DEPARTMENT OF AGRICULTURE

APPLICATION FOR FINANCIAL BENEFITS UNDER THE 2014/2015 FINANCIAL YEAR DROUGHT ASSISTANCE SCHEME FOR SMALL SCALE AND EMERGING FARMERS IN THE DESIGNATED DROUGHT AREAS OF LIMPOPO PROVINCE

1) PARTICULARS	OF AP	PLIC	ANT							
1.1 I (Full name & s										
(In the case of trustees' named letter of authorised to	es, ider	ntity n	umber	s, birth	ndates	must b	e attac	hed as	well as	s a
Identity numbe	r:					I		I	T	T
Postal Address										
Date of birth				Post	al Code	9				
Ye	ar			Month		Day				
Telephone No.					Co	de				
Cell phone No.										
·										
E mail address										
	Male		Fen	nale						
Gender										
Farmer category		_	_		_					
Small scale		Eme	rging			С	omme	rcial		

2) Property detail	S
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2.1Communal land (Only for Small scale & Communal Farmers)

District	Municipality	Name of farm/village	Ha. Grazing

Registered Farm Names	District	Area of farm (Ha)	Grazing Area (Ha)

2.3 The following properties are leased by me/us (Provide a copy of the lease agreement) (**Only for Commercial Farmers**)

Registered Farm Names	District	Area of farm (Ha)	Grazing Area (Ha)

Name and Address of owner in respect of leased properties
Name
Address
Code

3) Livestock inventory on all properties as listed in 2.1 & 2.2

3.1 Cattle Breeds

Cattle Breeds	Numbers	Conversion factor	LSU no.'s
Calf unweaned up to 7 months		0.50	
Weaners – (7 months & older)		0.64	
Cow/Heifer – (2 Tooth & older)		1.00	
Steer – (18 months & older)		0.75	
Steer - (3 years & older)		1.10	
Bull – (3 years & older)		1.36	
Totals			

3.2 Small Stock breeds

Small stock breeds	Numbers	Conversion factor	LSU no.'s
Lamb unweaned up to 4 months		0.08	
Weaned lambs – (4 months & older)		0.12	
Ewe's - (2 Tooth & older)		0.15	
Wether – (2 Tooth & & older)		0.16	
Castrate – (2 Tooth & older)		0.17	
Ram – (2 tooth & older)		0.25	
Totals			

5) Declaration

- 11.1.1 I declare that the information in this application is to the best of my knowledge and conviction, complete, true and just and that I understand and accept the conditions for participation as stated in this application form.
- 5.1. 2. Confirm that my livestock numbers as furnished by me on the livestock inventories in this document are correct and true.
- 5.1.3. I also declare that I have no interest in any other partnership/company/trust.

Applicants Signature	Date

For Departmental use only:

	NAME OF OFFICIAL	SIGNATURES	RANK	DATE
Recommended				
by				
Approved by				
Rejected by				

Reasons for rejection

(Departmental official with a rank equal Assistant Director to approve)



DEPARTMENT OF AGRICULTURE

REF: ENQUIRIES: TEL: DATE: TO: Mr/Me	OFFICE ADDRESS
ID NUMBER	
Address:	
Postal Code:	
RE: APPROVAL TO PARTICIPATE IN THE 2014/15 DROUGHT ASSISTANCE SCHEME FOR SMALI FARMERS	
Your application to participate in the above me scheme is hereby granted to feed LSL	
The (Name of Dowill provide your Livestock Feed demands approved daily stock feed intake per LSU on of approval to the Depot Manager and your subsidy in line with the farming category, (\$20%, commercial 30%)	in accordance with the presentation of this letter contribution towards the
DEPUTY MANAGER	DATE