Application for submission of proposal for financial assistance from National Fisheries Development Board Proposal for taking up Intensive Aquaculture in Existing Ponds and Tanks FORM-II

SL No.	Particulars sought from the applicant	Information furnished by the applicant
(1)	(2)	(3)
1.0	Name and address of the \(\) applicant/\(\) firm/\(\) association/\(\) Self Help Group (IN BLOCK LETTERS)	
2.0	Address for communication	
	(\rightarrow telephone/\rightarrow mobile number)	
3.0	Details of land where aquaculture activity is proposed to be taken up: Enclose land title document	
	a) State	
	b) District	
	c) Taluk/Mandal	
	d) Revenue Village	
	e) Survey Number(s)	
	f) Ownership (whether \(\) freehold or \(\) on lease) g) If on lease, duration of lease	
	h) pond/s area (in ha)	
	i) Total water spread area (in ha)	
	j) Approximate area of fish ponds within the 25-30 kms radius from the proposed site	

4.0	Month & year of construction of the ponds and financial assistance received.	
		Rs. /-
5.0	Production details of Fish/prawn from the year of construction.	
6.0	Whether assistance for this purpose has been sought under any other scheme of the Central/ State Government? If so, please provide the details	○ Yes ○ No
7.0	Present condition of the ponds and justification for renovation-Enclosure	
8.0	Details of the proposed renovation/ repair works of the ponds/ tank. (Certified by the Department of Fisheries/ FFDA/ ICAR Fisheries Institute/ Colleges of Fisheries)- Enclosure	
9.0	Estimates regarding input costs and economics of operations, certified by a Fisheries professional. Enclosure the details	Rs/-
10.0	Details of the bank providing financial assistance towards non-subsidy portion of the funds	
11.0	Whether the applicant is in default of payment to any Financial Institution/ Government.If yes, please provide the details and the reasons for default	○ Yes ○ No
12.0	Proposed date of operation of the farm and tentative schedule of activities	
13.0	Marketing tie up	

Declaration by the Applicant	
○ I/ ○ We	○ son/○ daughter/ ○ wife of
hereby dec	elare that the information furnished
above is true to the best of my/our knowledge and belief. I am/we that the information furnished in the application is false or there is of the conditions under which assistance is provided to me by the for violation of this condition may be taken against me/us.	any kind of deviation/violation
Place	
Date	Signature of the applicant/s
The application has been verified as per the NFDB guidelines and inspected by the Departmental Officer/s and found feasible for reraquaculture as proposed in the application.	
Place	
Date	Signature and seal of the Implementing Agency