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

SL No.	Particulars sought from the applicant	Information furnished by the applicant
(1)	(2)	(3)
1.0	Name and address of the \(\capplicat\) applicant/\(\capplicat\) association/\(\capplicat\) Self Help Group (IN BLOCK LETTERS)	
2.0	Address for communication	
	(○telephone/ ○ mobile number)	
3.0	Details of land where aquaculture activity is proposed to be taken up: Enclose copy of the land title document	
	a) State	
	b) District	
	c) Taluk/Mandal	
	d) Revenue Village	
	e) Survey Number(s)	
	f) Ownership (whether \bigcirc freehold or \bigcirc on lease)	
	g) If on lease, duration of lease (minimum 10 years)	
	h) Total area of the proposed pond/s (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	Details of the proposed construction works	
	of the new pond/ tank.(Design details/	
	engineering works to be certified by the	
	Department of Fisheries/ FFDA/ ICAR	
	Fisheries Institute/ Colleges Fisheries)	
5.0	Whether assistance for this purpose has	○ Yes ○ No
	been sought under any other scheme of the	
	○ Central/ ○ State Government ?	
	If so, please provide the details	
6.0	Estimates regarding input costs and source	Rs. /-
	of procurement certified by a Fisheries	
	professional.Enclose the details	
7.0	Experience of the applicant in the field and	years months
	details of training undergone so far	
8.0	Details regarding economics of operation	
0.0	XXI 41	
9.0	Whether any financial tie up has been made for availing Bank loan, if so please provide	-
	the details	
10.0	Expected date of operation of the farm and	
	tentative schedule of activities	
11 0	Marketing tie up	
11.0	ivial ketting tie up	

Declaration by the Applicant				
○ I/ ○ We	○ son/○ daughter/ ○ wife of			
hereby d	leclare that the information furnished			
above is true to the best of my/our knowledge and belief. I am/we are fully aware that if it is found that the information furnished in the application is false or there is any kind of deviation/violation of the conditions under which assistance is provided to me by the NFDB, any action as deemed fit for violation of this condition may be taken against me/us.				
Place				
Date	Signature of the applicant/s			
inspected by the Departmental Officer/s and found feasible for t proposed in the application.	taking up intensive aquaculture as			
Place				
Date	Signature and seal of the Implementing Agency			