

MINISTRY OF AGRICULTURE

LIMID 1

LIVESTOCK MANAGEMENT AND INFRASTRUCTURE DEVELOPMENT (LIMID) PROGRAMME

ANIMAL HUSBANDRY AND FODDER SUPPORT

APPLICATION FORM

Application instructions.

- 1. Only applicants who farm in communal areas are eligible for these grants.
- 2. The maximum grant for each package are presented below:

Fodder processor P12 000.00 Kraals, crushes and loading ramps P28 000.00 Fodder barn P15 000.00

- 3. All quotations must be obtained from registered/certified suppliers.
- 4. Government will not exceed the maximum grant stipulated above. Labour and transport costs are not included.
- 5. All applications must be routed through district extension offices.
- 6. All approved applicants should sign a Memorandum of Agreement with Botswana Government.
- 7. Please note that giving false information may result in your application being disqualified and/or prosecution.

Applicant(s) details

Name of group/individual	Sex: \square male \square F	Female
Date of application		
Number in a group		
District	Age(if ind	lividual)
Extension area	Village/location	
Postal address	Contact tel. no.	

E-mail address.		
Have you benefitted from agricultural support	schemes before? Yes	□ No
If yes, specify		
Which year?		
Attachments:		
Certified copy/copies of Omang (ID)		
Certified copy of approved constitution in case	of a group	
Certified copy of Land Board certificate or leas	se \square	
Certified copy/copies of brand certificate		
At least 3 quotations		
Financial plan		
Project description		
Benefits expected from the project		
Applicant(s) contribution P		
Government grant P		
Total project cost P		
Applicant's declaration		
I acknowledge that I have read and understand	d the application form. I ce	ertify that the information provided is true to the
best of my knowledge. I am also aware that if	f the information provided	is not true, it may be used against me in a court
of law.		
For individuals		
Applicant's signature	Omang No	Date
For group		
Chairman's signature	Omang No	Date
Secretary's signature	Omang No	Date
Treasurer's signature	Omang No	Date

Comments and Recommendations

Extension agent	
·	een verified and that eligibility conditions have been observed.
Name	SignatureDepartment
Omang No	Date
Comments by District LIMID Committee	
Comments	
Chairperson's signature	Date
Name	Omang No
Secretary's signature	Date
Name	Omang No

Decision by District Economic Development Committee

The application is:	Approved	Rejected	
Reasons for rejection:			
Chairperson's signature		Date	
Name		Omang No	
Secretary's signature		Date	
Name		Omang No	

LIVESTOCK INVENTORY AND IDENTIFICATION

Name of members	Omang No.	Bulls	Oxen	Cows	Tollies	Heifers	Calves	Goats	Sheep	Donkeys	Mules	Brand mark
Total												

(The extension Agent) certify that the information I provided has been verified and that the number of livestock written is current and correct.							
Name	Signature	Department	Omang No	Dat	e		
I/we acknowledge that I/we have	e provided the current	livestock census. I/we cer	tify that the information p	rovided is true	to the best of my/our k	mowledge	
Individual/Chairperson's Name		ndividual/Chairperson's sig	nature	Omang No	Date		
Secretary's Name	Secretary's signs	ature	Omang No	Date.			
Treasurer's Name	Treasurer's signature		Omang No	Date.			