



## APPLICATION FOR FARMER REGISTRATION FOR TELANGANA STATE MICRO IRRIGATION PROJECT

### Applicant Details (address for communication):-

Aadhaar Card No: \_\_\_\_\_ Pincode: \_\_\_\_\_  
Name of Applicant/Registered Company/Establishment (in BLOCK letters)\*: \_\_\_\_\_  
Father/Husband Name\*: \_\_\_\_\_ Age\*: \_\_\_\_\_ Gender\*:  Male  Female  
Type of land:  Patta Land  RIDP/CLDF/Block  Assigned Land  ROFR Physically Handicapped\*:  yes  No  
Social status:  OC  SC  ST  BC  Minority  
Land Owned: \_\_\_\_\_ (Acres) Land Leased: \_\_\_\_\_ (Acres)  
Total Land: \_\_\_\_\_ (Acres) Total land under Horticulture: \_\_\_\_\_ (Acres)  
Classified Dry Land Area: \_\_\_\_\_ (Acres) Survey Number/ROFR Certificate Number\*: \_\_\_\_\_  
Classified Wet Land Area: \_\_\_\_\_ (Acres) Number/ROFR Certificate Number\*: \_\_\_\_\_  
Category\*: \_\_\_\_\_ (auto select)

### Technical Information:

Type Of Soil:  Hard  Ordinary  Both  Others(specify) : \_\_\_\_\_  
Type Of Soil:  Alluvial  Black  Red  Loamy  Sandy  Others(specify) : \_\_\_\_\_

### Address for Corresspondance:

Door No : \_\_\_\_\_ Street: \_\_\_\_\_  
State \*: \_\_\_\_\_ District\*: \_\_\_\_\_ Mandal\*: \_\_\_\_\_  
Gram Panchayat\*: \_\_\_\_\_  
Village / Ward \*: \_\_\_\_\_ Habitation: \_\_\_\_\_  
Pin Code: \_\_\_\_\_ Landline No: \_\_\_\_\_ Mobile No\*: \_\_\_\_\_

### Permanent address:

State \*: \_\_\_\_\_ District\*: \_\_\_\_\_ Mandal\*: \_\_\_\_\_  
Village / Ward \*: \_\_\_\_\_ Door No: \_\_\_\_\_  
Locality/Land Mark: \_\_\_\_\_ Pin Code: \_\_\_\_\_

### Crop address

District \*: \_\_\_\_\_ Mandal \*: \_\_\_\_\_ Gram Panchayat\*: \_\_\_\_\_  
Village/ward \*: \_\_\_\_\_ Habitation: \_\_\_\_\_  
Survey Number \*: \_\_\_\_\_

### **Crop Details**

#### **Crop1**

Crop type \*:  Main  Inter  Multiple Area Proposed(in Ha) \*: \_\_\_\_\_  
Crop Grown\*: Agriculture/Aromatic&Medicinal/Condiments&Spices/Flowers/Fruits/Horticulturecrop/Nurseries/Sericulture  
/Vegetables (Tick on appropriate)  
Name of Crop\*: \_\_\_\_\_ MI system required\*:  Drip  Sprinkler Irrigation Subtype\*: \_\_\_\_\_



## Crop2

Crop type \* :  Main  Inter  Multiple Area Proposed (in Ha) \* : \_\_\_\_\_

Crop Grown \* : Agriculture/Aromatic&Medicinal/Condiments&Spices/Flowers/Fruits/Horticulturecrop/Nurseries/Sericulture /Vegetables (Tick on appropriate)

Name of Crop \* : \_\_\_\_\_ MI system required \* :  Drip  Sprinkler Irrigation Subtype \* : \_\_\_\_\_

## Crop3

Crop type \* :  Main  Inter  Multiple Area Proposed (in Ha) \* : \_\_\_\_\_

Crop Grown \* : Agriculture/Aromatic&Medicinal/Condiments&Spices/Flowers/Fruits/Horticulturecrop/Nurseries/Sericulture /Vegetables (Tick on appropriate)

Name of Crop \* : \_\_\_\_\_ MI system required \* :  Drip  Sprinkler Irrigation Subtype \* : \_\_\_\_\_

## Available Irrigation Facility details:

MI Company Selected by the farmer \* : \_\_\_\_\_

Alternative MI Company Selected by the farmer \* : \_\_\_\_\_

Water Pump type \* : \_\_\_\_\_ Capacity (HP) \* : \_\_\_\_\_

Source of Irrigation \* : \_\_\_\_\_ Date of Application \* : \_\_\_\_\_

Funding Pattern \* :  TSMIP  DEMOLOTS  IJP  MGNREGS  RKVY-OilPalm  RKVY-ISOPOM  
 SUGARCANE BIPARTITE

## Informant Details:-

Informant Name \* : \_\_\_\_\_ Informant Relation \* : \_\_\_\_\_

Delivery Type \* :  Manual  Local  Non-Local Mobile NO \* : \_\_\_\_\_

## Declaration:-

I/We \_\_\_\_\_ (son(s)/daughter(s)/wife of \_\_\_\_\_) residing at \_\_\_\_\_ hereby declare that the information furnished above is true to the best of my/our knowledge and belief. The shrimp culture operations carried out by me / us had not neither polluted the environment nor damaged the ecology of the adjacent area. I am/we are fully aware that if it is found that the information furnished by me / us is false and there is any kind of deviation / violation of the conditions on which registration was granted by the Authority, the authorization / renewal granted to me / us may be either suspended or cancelled.

## Document List:-

1. Aadhaar card copy \*
2. Land document \*
3. 1B \*

Applicant's Signature