PMMSY: DS-FV-21



Photograph

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Application Form to obtain Financial Assistance on Central Scheme on Pradhan Mantri Matsya Sampada Yojana.

(Name of the Scheme/Project: SUPPORT FOR ACQUISITION OF DEEP SEA FISHING VESSEL FOR TRADITIONAL FISHERMEN)

(Unit Cost: Rs. 120 lakhs Government Assistance: General Category - Rs.48 lakhs

ST/SC/Women -Rs. 72 lakhs)

1.	Name of the Applicant:							
2.	Address							
	H. No. :	Waddo:						
	Village:			Taluka :				
3.	Contact No:	Gender: Male/Female						
4.	Aadhaar card no.:	Enclosed/not enclosed						
5.	Mandate Form with pass be	Enclosed / Not Enclosed						
6.	Whether belongs to SC/ ST if applicable)	Enclosed / Not Enclosed						
7.	Registration no. of Mechan (trawler/purse seiner) (ca	IND-GA-01-						
8.	Letter of Cancellation of V new fishing vessel under re	Enclosed / Not Enclosed						
9.	Copy of design/plan of pro (tuna long lining & gill net Architecture/Builder include Bio toilets facilities	Enclosed/not enclosed						
10.	Particulars of the proposed new fishing vessel							
	Material:	Length:		Breadth:	Depth:			
11.	Copy of Quotation from au detail project report	Enclosed/not enclosed						
12.	Type of Fishing Net/Gear:							
13.	Copy of Quotation of Fishi	Enclosed/not enclosed						
14.	Proposed Engine to be incorporated on the proposed fishing vessel							
	Type of Engine: M	lake:	Model:	Horse Power:	No. of Cylinders:			
15.	Copy of Quotation of engir	Enclosed/not enclosed						
16.	Source of Finance							
	i) Self Finance			Rs				
	ii) Bank Finance	Rs						
	iii) Name of Bank							
17.	Name of Fisheries Coopera							

(Signature of the Applicant)

DECLARATION

I hereby declare that the particulars given on the application and enclosure are true and correct to the best of my knowledge and belief.

In case any information furnished/ submitted by me is found to be false, then I agree that the application is liable to be rejected and necessary action shall be initiated against me as per law.

Date:							
Place:	Name & signature of the applicant						
	Name:						
For use of Fisheries S	For use of Fisheries Surveyor / Officer / A.S.F. at Jetty/Sub Office level) Date of application received in the office:						
Date of application receiv							
	<u>CERTIFICATE</u>						
	1. All the necessary documents furnished along with this application have been verified and found in order. All the columns are duly filled in.						
2. Certified that the app	licant is not a defaulter of the Fisheries Department.						
Name & Signature of Fig.	Name & Signature of Fisheries Surveyor						
Remark if any							
Name & Signature of Fig	sheries Officer						
Remark if any							
<u>FOR</u>	USE OF F.S./F.O./A.S.F. AT HEAD OFFICE						
The application is so	crutinize and found in order as per the pattern of the						
assistance and the guide	elines of the scheme.						
Remark: 1							
2							

Name and signature of dealing hand

<u>NOTE:</u> All the columns are mandatory and have to be filled by concerned officers; incomplete applications received from block offices are liable for rejection. Department may request to furnish more documents as per its requirement to process the case.

			SELF D	ECLAI	RA'	ΓΙΟΝ	
I,							
Shri							
			son/wit	fe			of
Shri							r/o. H.
No						do hereby declar	re as follows;
1. I poss	sesses th	e following re	egistered fish	ing vess	sel/s	engaged in sea.;	
1				C		,	
Sr. N	0.	Registration	No. of Fishi	ng Vess	el	Name of Fishi	ng Vessel
1.				<u> </u>			
2.							
3.							
4.							
same is a 3. I have Panaji/ any competency during the l	my sole e not tal other C // for A ast Five	property. ken any subsi Government C Acquisition of	dy / financia Offices for the f Deep Sea	l assista e up gra fishing	nce dati ves	from any encumbrate on of existing of sel for Traditions	of Fisheries, fv for export
-	•					ot have Fishing Ve	-
ranning men	ibei nav	e the followin	ig Fishing Ve	28861/8 U	o ne	n have rishing ve	788C1/8.
Sr. No.		e of Family Member		Tame of the Fishing vessel		Registration No.	
1.			105	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2.							
3.							
4.							
5. I say	that my	Husband/Wi	fe Shri/Smt.				
aged yea	ars and i	my family me	mbers have r	ot taker	n an	y subsidy / financ	ial assistance
from Direct	torate of	f Fisheries, Pa	naji/any othe	er Gove	rnm	ent Offices for up	gradation of
existing of	fv for	export compe	tency/ for A	cquisitio	on c	of Deep Sea fishin	ng vessel for
Traditional	Fishern	nen during the	last Five yea	ars.			
6. I	say tha	t my family m	nembers detai	ls are as	s fol	lows:	
Sr. No.	Na	me of Family	Members	Age	I	Relationship to	Aadhar
						Applicant	No.
1.							
2.							
3.	_						
4. 7. I will	use the	Fishing Voss	sol/s and Note	nurche	nad	through Fisheries	Doportmont
		_		-	iseu	unough Fisheries	s Department
		e purpose of f	•		11404	of the Eigheries I	Danautmant
•						of the Fisheries I ne in order to pr	•
•					•	ne in order to pr ng subsidy under	
			•			na (Upgradation o	
			•	-		Deep Sea fishin	· ·
	-	ishermen).	y/ Ioi Acqu	18111011	OI	Deep Sea Hshin	g vesser for
		· ·	dealeration of	ro truo t	ta t1	no bost of my kn	oviladaa and
-	_					he best of my kn	•
			auon tumish	eu by m	1C 1S	found to be false	, mereby me
application 19	s nable t	o be rejected					
Date;					Si	ignature of the app	olicant
Place,		Name & Address;					