

**Proposal for establishing Fish Dressing/Processing Centres and  
Hygienic fish handling facilities**

Sl. No	Particulars	Information furnished by the applicant
(1)	(2)	(3)
1	Name and address of the Government Departments/ Quasi Government Organizations/ Research Institutes (IN BLOCK LETTERS):	
2	Address for communication (telephone/Fax/mobile number):	
3	Details of land where processing activity is proposed to be taken up:	
	State:	
	District:	
	Taluk/ Mandal:	
	Revenue Village:	
	Survey Number(s):	
	Ownership (whether freehold or on lease):	
	If on lease, duration of lease:	
	Total land area (in ha):	
	Total built up area (in ha):	
4	Details of the proposed activity (Lay out plan/ Design details and engineering works(item wise/work wise details)	
5	Whether the applicant is in default of payment to any Financial Institution/ State Government for loan/ assistance availed earlier. If yes, please provide the details and the reasons for default:	
6	<b><i>Estimates regarding input costs:</i></b>	
7	Products to be developed and species to be processed:	
8	Processing capacity:	
9	Recurring Cost Raw material Sub material Packing material Utilities	
10	Source of procurement:	
11	Experience of the applicant/Agency in the field and details	
12	Details regarding economics of operation:	
13	Whether any financial tie up has been made for availing Bank loan, if so please provide the details:	
14	Expected date of operation of the processing	

	activity:	
15	Marketing tie up:	

**Declaration by the Applicant**

I/ We.....son/daughter/wife of  
..... Working  
at..... hereby declare  
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 by me/ we/ us 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. Further, it is declared that this organization/institute has not availed  
any subsidy/grant for the proposed project or any part of it from any other Government  
Agency.

Date:

Place:

Signature of the applicant (s)

***Countersigned by the implementing Agency***

Date:

Signature and seal of the authorized  
representative of the Implementing Agency

## Proposal for fabrication of Solar drier/ Sun drying platforms

Sl. No	Particulars	Information furnished by the applicant
(1)	(2)	(3)
1	Name and address of the Government Department/ Quasi Government Organization/ Research Institute/ Farmer/ Entrepreneur (IN BLOCK LETTERS):	
2	Address for communication (telephone/ Fax/ mobile number):	
3	Details of land where drying activity is proposed to be taken up:	
	State:	
	District:	
	Taluk/ Mandal:	
	Revenue Village:	
	Ownership (whether freehold or on lease):	
	If on lease, duration of lease:	
	Total land area in which the drying unit be set up (in ha):	
4	Details of the proposed drying facility	
	Type of drying	
	Numbers and size of drier – Capacity of the drier (Raw material)	
	Technology to be adopted	
	Production capacity	
	Source of water	
	Details of the proposed construction works of drier, Design details/engineering works.	
5	Details on tie up with the Bank for availing institutional finance	
6	Arrangement for seed money	
7	Whether the applicant is in default of payment to any Financial Institution/ State Government for loan/ assistance availed earlier. If yes, please provide the details and the reasons for default:	
8	<i>Experience of the applicant in drying and details of training undergone</i>	
9	<i>Details regarding economics of operation</i>	
10	Expected date of operation of the drier and tentative schedule of activities	
11	Number of drying units set up within a radius of 10 km	
12	Source and number of workers employed for day-today drying operations	

**Declaration by the Applicant**

I/We.....son/ daughter/ wife of  
.....Working  
at..... hereby declare 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 by me/ we/ us 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. Further, it is declared that this organization/institute has not availed  
any subsidy/grant for the proposed project or any part of it from any other Government  
Agency.

Date:

Place:

Signature of the applicant (s)

***Countersigned by the implementing Agency***

Date:

Signature and seal of the authorized  
representative of the Implementing Agency

**Proposal for Training and Demonstration in Fish processing/ Solar Drying of fish/  
Value addition**

Sl. No	Particulars sought from the Agency	Implementing Agency	Information furnished by the Implementing Agency		
(1)	(2)	(3)			
1	Name and address of the Implementing Agency:				
2	Location of the Training Facility:		<b>District</b>	<b>Block</b>	<b>Village</b>
3	Facilities available or proposed for imparting training:				
4	(a) Details of the Training Programme: (b) Number of persons to be trained in fish processing/pre-processing/solar drying/ valued added product processing (to be given separately):				
5	<i>Whether the Implementing Agency proposes to conduct training at its own training centre or in field? Number of training programmes to be conducted in a year may be indicated? What is the group size?</i>				
6	Financial Implications:		<b>Number</b>	<b>Amount</b>	
	<b>Item</b>				
	<b>a) Training</b>				
	(i) DA of Rs. 150/day/trainee and reimbursement of actual to and fro travel, subject to a maximum of Rs. 500/trainee)				
	(ii) Honorarium of Rs. 500/day and actual to and fro travel expenses, subject to a maximum of Rs. 1000/-				
	(iii) Rs. 75/trainee/day to the Implementing Agency towards identification, mobilization of beneficiaries, supply of training material, etc.				
	<b>b) Demonstration Unit</b>				
7	Technical capabilities of resource persons to be engaged in training:				
8	Any other details in support of the proposal				

Date:

**Signature and seal of the authorized  
representative of the Implementing Agency**