

AGRO-INVESTMENT CORPORATION LAND LEASE APPLICATION FORM for the SOUTHERN PLAIN AGRICULTURAL DEVELOPMENT (SPAD) PROJECT

SECTION 1: APPLICANT INFORMATION

Applicants are required to complete Section A or Sections B and C

Section	Section 1A: To be completed by individuals and unregistered entities.					
1.	1. Name of Applicant:					
2.	Address:					
	Age:_					
4.	Gender: Male Fema	e Other				
5.	Telephone Number/s:					
6.						
7.	Date Operation Commence					
8.	TRN:					
10.	O. Company's Name / Name of Group:					
	Number of Members (Group):					
	TRN:Address of Registered Office:					
	Mailing Address of Compa					
	5. Date of Incorporation: 6. Date Operation Commenced:					
17. Shareholders and Shareholdings (kindly complete the table below): Name						
Name		70 Holding		IMI		



18.	Pai	ticulars of Chief Executive Officer/Manager/Managing D	irector/Group Leader						
	a)	Name:							
	b)	Address:							
	c)								
	d) Email address:								
	e)	Company's Attorney:							
SECTI	ON	2. INFORMATION ON LAND/SPACE REQUIRED							
19.	Fai	rm Size (acres):							
20.	Na	ture of your business:							
		sired Location:							
	a)	Amity Hall Bridge Pen, St. Catherine							
	b)	Parnassus, Clarendon							
SECTI	ON	3. PRODUCTION INFORMATION							
22.	Pro	ducts to be Cultivated/ Manufactured							
		Products to be cultivated/manufactured	Projected Quantity/Acres						
SECTI	ON	4. FINANCIAL DATA							
23.	Pro	jected Capital Investment Required :							
24.	Pro	ject Financing/Funding Source:							
25.	Att	ach Audited Financial Statement (where applicable) and E	Bank Statements.						
SECTI		5. TECHNICAL COMPETENCE							
SECTI			YES NO						
26		ndicate by a tick in the box which one best suit you:	1ES NO						
26.	Ar	e you willing to participate as a group/Cooperative?							
27	Δr	e you willing to contribute to cost share expenses?							
28.		e you willing to maintain up-to-date farm records?	T T						
29.		e you willing to adopt prescribed farming techniques and r	related						
۵).	111	, you withing to adopt presented faithing techniques and i							
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best practices as recommended by the Ministry of Agriculture, Fisheries and Mining/ RADA Team?

30.	How long have you been involved in farming/agri-business?
31.	State the type of training and institution training received?
	Provide details on the Management of the facilities/ farm including name and contact information?
SECTIO	ON 6. BUSINESS PROPOSAL SUMMARY
33.	List Available Markets (please submit market contracts)
	ION 7. REFERENCES – TO BE COMPLETED BY INDIVIDUALS AND GROUPS either a Justice of the Peace, Credit Union Manager, Bank Manager, Member of Parliament,

Public Officer (SEG 1 and Above), Medical Practitioner and or Principal (Primary, Secondary or

Tertiary Educational Institution). (Not less than 2)

34. Kindly list two references below:

Name	Name Company (individual)		Address	Telephone #	Email Address	

SECTION 8: CASHFLOW & IMPLEMENTATION PLAN

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Name of Company / Applicant:	
Signature of Applicant:	Date

CHECKLIST:

Documents that must accompany this application:

No	Document Type	Attached (Yes or No)
1	Copy of TRN	
2	Copy of Identification	
3	Copy of certificate of incorporation (if	
	applicable)	
4	Cashflow statement	



5	Production/Implementation plan	
4	Letter/market contracts	
7	Proof of Finance	
8	Proof of Processing Fee Payment	
9	Business plan (If requested)	