



**SUGAR INDUSTRY AUTHORITY
CANE EXPANSION FUND (CEF)
LOAN/GRANT APPLICATION FORM [CEF FORM1]**

REPLANTING NEW PLANTING DRIP IRRIGATION SEED CANE NURSERY

1. Name _____
Last First Middle
2. a. Date of Birth _____ b. Age: _____ c. TRN _____
3. Gender Male Female 4. A. Occupation: _____ b. Are you a Connecting Party Yes _____ No _____
5. a Address _____ b. Email Address _____
6. a. Home Telephone No. _____ b. Mobile Phone _____ c. Business Phone _____
- 6 d. Name of Next of Kin _____ e. Address of Next of Kin _____
6. f. Telephone Number _____
7. Farmer's Reg. No. _____ 8. Other factory registration no. assigned: _____
9. Factory to which farmer is registered _____ 10. Factory to which cane is delivered _____
- 11a. Location of Farm _____ b Brief Direction to Farm _____
12. Distance from Factory (kilometers) _____
13. Total hectares: (Owned) _____ (Leased) _____ 13a. Hectares in cane: (Owned) _____ (Leased) _____
- 14 Duration of Lease: [____ Years] From _____ to _____
15. a. Tonnes Cane sold & Productivity/ha last two (2) Crops: 15b. 20__ __ () (tc/ha)
15 c. 20__ __ () (tc/ha)
16. Productivity to date 20__ __ Crop: 20__ __ () (tc/ha)
17. Field condition Poor Satisfactory Good
18. Current ha under Drip Infrastructure: Hectares _____ Yield/ha _____

PURPOSE OF APPLICATION

	Hectares	Total Cost (\$)	Loan	Grant (\$)	Farmer's Contr. (\$)
1. REPLANTING	_____	_____	_____	_____	_____
2. NEW PLANTING	_____	_____	_____	_____	_____
3. DRIP IRRIGATION	_____	_____	_____	_____	_____
4. SEED CANE NURSERY	_____	_____	_____	_____	_____
TOTAL	=====	=====	=====	=====	=====

LOAN(S) OUTSTANDING:

	Institution	Amount (\$)	Arrears (\$)	Period Outstanding
	_____	_____	_____	_____
	_____	_____	_____	_____
Total	=====	=====	=====	=====

Signatures:
Name of Applicant Signature of Applicant Date

For Official Use Only:

APPLICATION REVIEW

SCORE - EXCELLENT (4) POOR (1)

LOCATION: _____ PRODUCTION HISTORY: _____ EQUITY: _____ CREDIT RISK: _____

AVERAGE SCORE: _____

VIABILITY: YES NO ELIGIBILITY: YES NO COMPLETENESS: YES NO

GENERAL REMARKS: _____

Name: SIGNATURE: Date.....
CREDIT OFFICER