DAIRY DEVELOPMENT DEPARTMENT FORM OF APPLICATION FOR SUBSIDY AS PER THE RULES FOR THE GRANT OF SUBSIDY TO NEWLY REGISTERED DAIRY CO-OPERATIVES

DISTRICT :			BLOCK :				
1. Name of society with Register No. and full postal address	:						
2. Date of registration of the society	:						
3. Date of starting the society	:						
4. Date of first promoting committee meeting	:						
5. Name and address of Chief Promoter	:						
6. Date of first General Body meeting	:						
7. Date on which the DCS activity has started functioning	:						
8. Paid up share capital of the society as on date of application	:						
9. No. of members as on the date of application	:						
10. Daily average quantity of milk (in litres) procured by the society	:						
11. No. of members, non-members supplying milk and	:		MEM	N		Л	
daily average quantity of milk (in litres) procured by the DCS as on date.		NO.	QTY (LTR)	NO.	QTY(L	TR)	
12. Details of the mode of disposal of milk collected	: Loca	al sales	- Ipd (av.),	Milma	Sales -	lpd (av.)
 Amount of subsidy applied for (as per existing norms) 			(Rupe				····· /)
14. Date of application for the subsidy	:						
15. Resolution No. and Date of B.O.D for applying the assistance	: Res	olution	No	da	ited		
16. Whether true copies of the following resolution of the Managing Committee of the society duly attested by President, Secretary and two other committee members attached to the application							
a. Resolution for applying the subsidy		:	Yes / No				
b. Resolution to the effect that the grant of subsidy shall be utilized for the society as per the original scheme		:	Yes / No				
c. Resolution agreeing to abide by all the rules governing the grant of the subsidy and also any further rule that may be framed by the Government in this regard	9	:	Yes / No				
 Resolution undertaking that the assets shall not be pledged, sold or otherwise disposed off 		:	Yes / No				

- 17. Name and full address of the President of the society
- 18. Name and full address of the Secretary of the society : (specify whether Honorary or paid)
- 19. Name and full address of the two committee members:1.signing the application.

2.

DECLARATION

:

We, Sri/Smt	President ,Sri/Smt
Secretary, Sri/Smt	and Sri/Smt
Committee members of the	(society)
Ltd No	. do hereby declare that the information furnished above are true and correct to the
best of our knowledge and belief.	
Place :	

Date :

(SOCIETY SEAL)

Signature (Secretary)

Sri./Smt	.(President)
Sri./Smt	.(Secretary)
Sri./Smt	.(Committee member)
Sri./Smt	.(Committee member)

RECOMMENDATION BY DAIRY EXTENSION OFFICER

Station : Office Seal Signature and Name of the Dairy Extension Officer

SANCTION OF THE DEPUTY DIRECTOR

Station	:	
Date	:	

Office Seal

Deputy Director