



## SUBSIDY REFUND CLAIM FORM

### COMMERCIAL WHITE MAIZE AND MAHANGU PRODUCTION - RAINFED

### NATIONAL DROUGHT SUPPORT PROGRAMME FOR SURPLUS AND COMMERCIAL GRAIN PRODUCERS - 2024

1. Applicants must attach the following to this claim form:
  - a) A certified copy of the applicant's ID or land ownership certificate
  - b) Attach a copy of the supplier invoice (paid-up) / receipt from the supplier with names.
  - c) See the attached **Call for commercial/ sur-plus farmers** for more details and requirements.

**NB: PLEASE COMPLETE ALL THE FIELDS AS REQUIRED**

1. APPLICANT NAME:.....4. SURNAME:.....
2. CONTACT NUMBER: .....6. NATIONALITY:.....
3. IDENTIFICATION NUMBER: .....8. SEX: MALE  FEMALE
4. PRODUCTION ZON: .....10. NAB PRODUCER NUMBER:.....
5. FARM NAME: .....LOCATION (DISTRICT/ VILLAGE):.....
6. GRAIN PRODUCTION EXPERIENCE (YEARS): .....
7. FARMERS STATUS **(Please tick where applicable)**

|           |           |        |            |         |
|-----------|-----------|--------|------------|---------|
| Fulltime: | Parttime: | Youth: | Pensioner: | Others: |
|-----------|-----------|--------|------------|---------|

8. WHEN LAST DID YOU SELL: WHITE MAIZE (YEAR):  MAHANGU (YEAR):

#### 9. EXPECTED PRODUCTION INFORMATION – 2024/2025

| Crop                      | Total Hectares to be planted | Hectares to be Subsidized | Expected Date of Planting |
|---------------------------|------------------------------|---------------------------|---------------------------|
| 1. White Maize            |                              |                           |                           |
| 2. Pearl Millet (Mahangu) |                              |                           |                           |

#### 10. INPUTS PURCHASED DETAILS **(ATTACH SUPPLIER INVOICE PAID UP OR A RECEIPT)**

| 10.1 WHITE MAIZE SEEDS AND FERTILISER SUBSIDY |            |                 |                    |                      |              |                |                    |
|---|------------|-----------------|--------------------|----------------------|--------------|----------------|--------------------|
| Name of Supplier                              | Input Type | Variety or Type | Quantity Purchased | Unit Price (N\$/bag) | Total Amount | Subsidy Rate % | Subsidy Amount N\$ |
|   |            |                 |                    |                      |              |                |                    |
|   |            |                 |                    |                      |              |                |                    |
|   |            |                 |                    |                      |              |                |                    |
|   |            |                 |                    |                      |              |                |                    |
| <b>Total</b>                                  |            |                 |                    | n/a                  |              | n/a            |                    |

**10.2 MAHANGU SEEDS AND FERTILISER SUBSIDY**

| Name of Supplier | Input Type | Variety or Type | Quantity Purchased | Unit Price (N\$/bag) | Total Amount N\$ | Subsidy Rate % | Subsidy Amount N\$ |
|------------------|------------|-----------------|--------------------|----------------------|------------------|----------------|--------------------|
|                  |            |                 |                    |                      |                  |                |                    |
|                  |            |                 |                    |                      |                  |                |                    |
|                  |            |                 |                    |                      |                  |                |                    |
|                  |            |                 |                    |                      |                  |                |                    |
| <b>Total</b>     |            |                 |                    | n/a                  |                  | n/a            |                    |

Hereby declare that the information provided above is true and correct.

**APPLICANT (FULL NAME) .....SIGNATURE.....DATE.....**

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**FOR OFFICIAL USE**

**COMMENTS/ REMARKS**

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 .....

**VERIFIED BY..... SIGNATURE .....DATE.....**

**RECOMMENDED/ NOT RECOMMENDED**

**MANAGER: AD (NAME).....SIGNATURE .....DATE.....**

**APPROVED/ NOT APPROVED**

**GM: AHD (NAME).....SIGNATURE .....DATE.....**