



PLAS FARMS LEASE APPLICATION FORM

APPLICATION INFORMATION AND CONDITIONS

1. Eligibility Criteria

To be eligible to be granted a Land /farm to Lease you must meet the following Eligibility Criteria :

(a) Applicant/s must not be employed by the three sphere of government or employees of all public entities prior to the signing of lease, politicians who hold public office, traditional leaders who receives remuneration from the State and permanent residents who are issued permanent residence permits as prescribed into Sec 26 & 27 of Immigration Act, 2002 (Act 13 of 2002). Public servants and their spouses shall not qualify to benefit from agricultural support irrespective of them falling under any of the categories identified above.

(b) You must live on the land/ farm following lease approval.

(c) The target group for agricultural support which is Africans, Indians and coloureds.

(d) Agricultural sciences university and college graduates, (b) Agri-business special courses, including NARYSEC participants and © managerial and entrepreneurial incubation, learner ships/internship, and (d) agricultural para-professionals.

(e) Subsistence farmers: (a) Communal/village subsistence farmers, (b) Municipal commonage farmers mainly livestock farmers, and ©sustained homestead garden producers.

(f) Further priority, within the target group shall be given to women and the youth who either have basic farming skills or demonstrate a willingness to acquire such skills.

Special attention shall be paid to the youth with experience or qualifications in the field of agriculture.

(g) "Special category": (a) Women, including single women, (b) people with disabilities, (c) farm workers/dwellers/tenants, (d) Military Veterans, as defined in the Military Veterans Act, 2011 (Act No.18 of 2011) irrespective of their race, shall also be prioritized. This shall however exclude those who served in the Union Defence Force (prior to 1961) and the South African Defence forces (prior to 27 April 1994) who do not fall under the categories defined

(h) Public servants and their spouses shall not qualify to benefit from agricultural support irrespective of them falling under any of the categories identified above

2. Compliance Check

A full compliance check of your details provided in this Application for Land Lease and any other information requested and provided by you will be undertaken checked for compliance.

If you are deemed ineligible:

(a) Your application will be rejected

(b) If you have provided false or misleading information, DRDLR will terminate Contract.

3. Acceptance or Rejection of Application

The Application will be assessed in accordance with the conditions and requirements advertised and may be rejected if:

(a) You do not meet the Eligibility Criteria above; or

(b) You or your spouse are employed by the state

(c) The Application has not been fully completed or executed to the satisfaction of DRDLR

4. Termination of Application

A provisional allocation or selection shall cease under the following circumstances:

(a) Death of the potential beneficiary

(b) Criminal records or conviction

(c) Written withdrawal of application by the beneficiary

(d) Withdrawal of the farm by the land owners or seller

(e) Any other circumstances that the committee may feel justify the termination or withdrawal of the allocation.

(f). The land obtained through PLAS should not be sub-let/rented out, if found the Department should take back the land.

5. Documents to be attached to the PLAS application Form

1. SA certified ID copy of applicant & spouse.

2. Proof of residence

3. Certified Legal Entity Registration Certificate (if the applicant is an entity)

4. Schedule of own assets (related to farming) eg. Livestock, farm implements and machinery etc.

5. Copy of marriage certificate (if married)

6. Livestock Branding Certificate

7. Certificate/s of training provided (if any)

8. Financial Resources to cover first production Cycle/ to purchase livestock (e.g. proof from the bank).

9. Letter of Authority to represent an entity (if applicant is a legal entity)

10. Tuberculosis (TB) and Brucellosis/Contagious Abortion (CA) certificate for Livestock

11. The applicant/s must provide a written commitment (in the form of affidavit) to pay the lease as per contract terms and also a written commitment to reside on the farm

Date Received
Province/District
Application reference number
Name of official receiving application
Signature of applicant

All questions contained in this questionnaire are strictly for Official purposes and would be treated confidential

☐ Please tick or mark with an X the relevant box

APPLICANT DEMOGRAPHIC PROFILE

Full Name	<input type="checkbox"/> M <input type="checkbox"/> F	ID Number:
Surname		Date of Birth
Marital status:	<input type="checkbox"/> Single/never married <input type="checkbox"/> Cohabitation(living together) <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	
Category of Applicant	<input type="checkbox"/> category 1 (Subsistence Farmer) <input type="checkbox"/> category 2 (Small Scale Farmer) <input type="checkbox"/> category 3(Medium Scale Farmer) <input type="checkbox"/> Category 4 (Large Scale Commercial Farmer)	
Target Group of Applicant	<input type="checkbox"/> Farm dweller <input type="checkbox"/> farm worker <input type="checkbox"/> Labor tenant <input type="checkbox"/> War Veteran <input type="checkbox"/> youth <input type="checkbox"/> Women <input type="checkbox"/> War Veteran <input type="checkbox"/> Commonage Farmer <input type="checkbox"/> NARYSEC/Agricultural Graduate <input type="checkbox"/> Other Specify	
Ethnic Group of Applicant	<input type="checkbox"/> African <input type="checkbox"/> Indian <input type="checkbox"/> Coloured	
Spouse Full Name	Spouse Employer	
Spouse ID	Spouse contact Details	
Residential Address:	Postal address:	
Suburb/village	Suburb	
Nearest Town		
Municipality	Postal Code	
District	Province	
Province	Facebook/twitter account	
Telephone no	Cell phone no	
Fax number	Email Address	
How long have you been living in this address	<input type="checkbox"/> 1-2 yrs. <input type="checkbox"/> 2-4 yrs. <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+	
Preferred District/Municipality to Lease		

EMPLOYMENT AND EDUCATIONAL DETAILS

Occupation:	<input type="checkbox"/> student <input type="checkbox"/> Pensioner <input type="checkbox"/> Farmer <input type="checkbox"/> Farm worker <input type="checkbox"/> Self Employed <input type="checkbox"/> Employed in the private Sector <input type="checkbox"/> Unemployed <input type="checkbox"/> Internship <input type="checkbox"/> other
Name of Employer	
Type of Employment	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporal <input type="checkbox"/> contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Internship/NARYSEC <input type="checkbox"/> Volunteering <input type="checkbox"/> other
Business activities (self-employed)	
Sources of Income	<input type="checkbox"/> Salaries, wages, commissions <input type="checkbox"/> Income from Business <input type="checkbox"/> Pensions funds <input type="checkbox"/> Grants(includes old age pension) <input type="checkbox"/> Sales of Farming products and services <input type="checkbox"/> Remittances(money received from people living elsewhere) <input type="checkbox"/> no income <input type="checkbox"/> other income sources (rental income, interest)

Highest level of Education completed:	<input type="checkbox"/> No Education	<input type="checkbox"/> Secondary	<input type="checkbox"/> National Diploma(Technikon/University)	<input type="checkbox"/> Bachelor's Degree
	<input type="checkbox"/> Primary	<input type="checkbox"/> N1-N4	<input type="checkbox"/> Honors Degree	<input type="checkbox"/> Bachelor's Degree & Postgraduate
	<input type="checkbox"/> Matric	<input type="checkbox"/> N5-N6	<input type="checkbox"/> Master's Degree	<input type="checkbox"/> Doctorate Degree

Have you received any training related to farming (formal or informal)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Training of Applicant Related to Farming/ Agriculture

Year	Name of Training	Institution (formal/ informal)

Training of Applicant related to Management (Financial, Marketing and etc)

Year	Name of Training	Institution (formal/ informal)

INSTITUTIONAL ARRANGEMENT

Are you a member of a group that wants to farm collectively?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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	M	F
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Size of group		
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Number of Disabled		
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18-35 yrs.		
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36-50 yrs.		
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51-65 yrs.		
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65-79 yrs.		
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80 yrs. and above		
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Total		
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Type of Legal Entity:	<input type="checkbox"/> Communal Property Association <input type="checkbox"/> Company <input type="checkbox"/> Trust <input type="checkbox"/> Close Cooperation <input type="checkbox"/> Cooperative <input type="checkbox"/> Farmers Association <input type="checkbox"/> other
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Years of Group entity existence	<input type="checkbox"/> 0-1 year <input type="checkbox"/> 2-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+
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Legal Entity Registration Number	
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Name Surname of Contact Person	
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Postal Address of Entity	
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Telephone:	Cell:	Email:
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AGRICULTURAL ACTIVITY

Are you currently involved in Farming?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Do you pay rent where you farm	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Type of Land ownership where you currently Farm	<input type="checkbox"/> Rented <input type="checkbox"/> Private/Family Farm <input type="checkbox"/> Communal Land <input type="checkbox"/> State Land <input type="checkbox"/> Communal Land (Tribal Land) <input type="checkbox"/> Labor Tenant <input type="checkbox"/> Farm dweller <input type="checkbox"/> Other (specify)
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How many years have you been Farming			<input type="checkbox"/> 1-2 yrs. <input type="checkbox"/> 2-4 yrs. <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+		
Type of Farming Experience					
Which Social clubs/ association/organization do you belong to			<input type="checkbox"/> Farmers Association <input type="checkbox"/> Producers Association <input type="checkbox"/> Cooperatives <input type="checkbox"/> community Garden Group <input type="checkbox"/> Stokvel <input type="checkbox"/> Special Interest Group <input type="checkbox"/> other (specify)		
Do you require assistance with the following			<input type="checkbox"/> Development of Business plan <input type="checkbox"/> Market Access <input type="checkbox"/> Business Registration <input type="checkbox"/> Mentorship <input type="checkbox"/> Agricultural Training <input type="checkbox"/> Management Training <input type="checkbox"/> other (specify)		
No of people to be employed by Project?					
No of employees		Type of employment			
		<input type="checkbox"/> Permanent <input type="checkbox"/> Temporal <input type="checkbox"/> contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Internship <input type="checkbox"/> Volunteering <input type="checkbox"/> other			
		<input type="checkbox"/> Permanent <input type="checkbox"/> Temporal <input type="checkbox"/> contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Internship <input type="checkbox"/> Volunteering <input type="checkbox"/> other			
		<input type="checkbox"/> Permanent <input type="checkbox"/> Temporal <input type="checkbox"/> contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Internship <input type="checkbox"/> Volunteering <input type="checkbox"/> other			
Does your Household own Livestock/crops: <input type="checkbox"/> Cattle <input type="checkbox"/> Sheep <input type="checkbox"/> Goat <input type="checkbox"/> Pigs <input type="checkbox"/> Chicken <input type="checkbox"/> Geese <input type="checkbox"/> other (Specify) <input type="checkbox"/> Grain <input type="checkbox"/> veg <input type="checkbox"/> sugar Cane <input type="checkbox"/> Pigs <input type="checkbox"/> Chicken <input type="checkbox"/> Geese <input type="checkbox"/> other (Specify)					
Type of Animal/Horticulture and Crop Production		Number of Livestock/ hectares farmed		<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
				<input type="checkbox"/> Household consumption <input type="checkbox"/> Sale	
Previous Grants received from Government: <input type="checkbox"/> SLAG <input type="checkbox"/> LRAD <input type="checkbox"/> CASP <input type="checkbox"/> Restitution Grant <input type="checkbox"/> Housing Subsidy <input type="checkbox"/> Agricultural Grant <input type="checkbox"/> other (Specify)					
Name of Grant		Government Department		Amount Received	
Income Range received through work, business or farming per month		<input type="checkbox"/> 0-R199			
		<input type="checkbox"/> R200-R499			
		<input type="checkbox"/> R500-R1199			
		<input type="checkbox"/> R1200-R1799			
		<input type="checkbox"/> R1800-R2499			
		<input type="checkbox"/> R2500-R4999			
		<input type="checkbox"/> R5000-R9999			
		<input type="checkbox"/> R10000- above			

What are you intending to use the land for?

Agricultural Enterprise	Type
<input type="checkbox"/> Crop Production	<input type="checkbox"/> Grains <input type="checkbox"/> Vegetable <input type="checkbox"/> Sugar cane <input type="checkbox"/> Tobacco <input type="checkbox"/> Cotton <input type="checkbox"/> Grain <input type="checkbox"/> Tea <input type="checkbox"/> Sunflower <input type="checkbox"/> Nuts <input type="checkbox"/> Other Specify
<input type="checkbox"/> Viticulture/Vineyards	
<input type="checkbox"/> Horticulture	<input type="checkbox"/> Fruits <input type="checkbox"/> Herbs <input type="checkbox"/> Flowers <input type="checkbox"/> Medicinal plants <input type="checkbox"/> Mushrooms <input type="checkbox"/> Sprouts <input type="checkbox"/> Non-food crops (Grass) <input type="checkbox"/> Other(specify)
<input type="checkbox"/> Beekeeping	
<input type="checkbox"/> Animal Production	<input type="checkbox"/> Beef <input type="checkbox"/> Dairy (cows) <input type="checkbox"/> Dairy (Goats) <input type="checkbox"/> Goat <input type="checkbox"/> Sheep <input type="checkbox"/> Pig <input type="checkbox"/> Ostrich <input type="checkbox"/> Poultry (layers) <input type="checkbox"/> Poultry (Broilers) <input type="checkbox"/> Aquaculture <input type="checkbox"/> Other(specify)
Main Areas of Interest	<input type="checkbox"/> Primary Production <input type="checkbox"/> Processing <input type="checkbox"/> Marketing
Interested in Producing for	<input type="checkbox"/> Own Consumption <input type="checkbox"/> Informal Market <input type="checkbox"/> Formal Market
List of farm implements (Irrigation Land)	
What support is needed to help improve your farming	<input type="checkbox"/> Machinery <input type="checkbox"/> Implements <input type="checkbox"/> Production Inputs <input type="checkbox"/> Infrastructure <input type="checkbox"/> Finance <input type="checkbox"/> Access to Markets <input type="checkbox"/> Agricultural Training <input type="checkbox"/> Other(specify)

HOUSEHOLD MEMBER DETAILS (List all persons in your Household, Group Applications, this part must be completed by all Members of the group)

HOUSEHOLD REF NO

FATHER		MOTHER		SIBLING		CHILDREN/GRANDCHILDREN	
<input type="checkbox"/> Employed(E)	<input type="checkbox"/> Unemployed (U)	<input type="checkbox"/> Employed(E)	<input type="checkbox"/> Unemployed (U)	<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> M	<input type="checkbox"/> F
Full Name:		Full Name:		Full Name:		Full Name	
ID:		ID:		ID:		ID	
<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> Employed	
<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> Unemployed	
Full Name		Full Name		Full Name		Full Name	
ID		ID		ID		ID	
<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> Employed	
<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> Unemployed	
Full Name		Full Name		Full Name		Full Name	
ID		ID		ID		ID	
<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> M <input type="checkbox"/> E		<input type="checkbox"/> Employed	
<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> Unemployed	
Full Name		Full Name		Full Name		Full Name	
ID		ID		ID		ID	

DECLARATION

I declare that the information furnished in this applicant form is, to the best of my knowledge, true and correct. I also declare that I am not employed by the public service / not a politician / not a member of the traditional authority remunerated by the State and to the effect that my spouse is not a civil servant and acknowledge that any misrepresentation in this regard constitutes a ground for immediate termination of the agreement.

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Signature of applicant

For office use

Land parcel Details	Province
Farm Name	District Municipality
Farm Number	Local Municipality
Property Type	Deeds Registry
Portion	Current Commodity
Registration Division	Proposed Commodity
LPI Code	Purchase Price
Hectares/ Extent	Proposed date of Transfer