



AGRICULTURAL LAND ALLOCATION APPLICATION FORM(ALA)

APPLICATION INFORMATION AND CONDITIONS

1. ELIGIBILITY AND EXCLUSION CRITERIA

To be eligible, the potential lessee must meet the following criteria:

- (a) Applicants must be from previously disadvantaged South Africans, namely: Africans, Indians, Coloureds, and South African Chinese, who are South African citizens. The African in this context includes persons from the first nations of South Africa;
- (b) Natural and juristic persons who fits the description above, of Blacks who were previously disadvantaged;
- (c) Applicants must be 18 years or older and in possession of a valid South African bar-coded Identity Document;
- (d) Priority within the target groups shall be given to women, youth and persons with disabilities (PwDs);
- (e) Other categories such as unemployed military veterans (as defined in the Military Veterans Act, 2011), farm workers, dwellers, labour tenants, unemployed agricultural graduates and NARYSEC participants, shall qualify to apply;
- (f) All Public Servants currently serving (National, Provincial, Local spheres of government and State-Owned Enterprises (SoEs) are not allowed to apply;
- (g) All former public servants who have successfully completed their 24 months cooling period (after leaving the public service);
- (h) Former public office bearers who have successfully completed their 12 months cooling period (after leaving public office);
- (i) The successful applicant must be willing to stay fulltime on the farm for the duration of the lease contract; and
- (j) Traditional leaders who are recognized under any legislation in the country shall qualify, provided they disclose their status and remuneration by the State and have proven that they are involved in farming activities at various scales. The Minister shall make a final determination in this regard.

2. 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;
- (b) A full compliance check of your details will be conducted, should it be found that you have provided false or misleading information, your application will be rejected. In case where approval was done the lease will also be terminated.

3. TERMINATION OF APPLICATION

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

- (a) Death of the potential beneficiary;
- (b) Written withdrawal of application by the beneficiary;
- (c) Withdrawal of the farm by the Department; and
- (d) Any other circumstances that the committee may feel justify the termination or withdrawal of the allocation.

4. DOCUMENTATION REQUIRED AT A LATER STAGE

- (a) In the case of a natural person: Certified copy of the applicant's barcoded South African ID;
- (b) In the case of a juristic person: Unabridged Legal entity registration certificate, certified copies of all members' SA IDs, and a Resolution appointing the representative;
- (c) Recent tax certificate confirming that the applicant/ legal entity is registered with SARS as a tax payer (except where the applicant or legal entity is excluded in terms of SARS requirements); and
- (d) In case of livestock, branding, Tuberculosis (TB), Brucellosis and Contagious Abortion (CA) Certificates must be attached.

DECLARATION BY AN APPLICANT FOR AGRICULTURAL STATE LAND ALLOCATION IN TERMS OF THE STATE LAND LEASE AND DISPOSAL POLICY.

I.....
.....(full name(s) and surname as reflected in the ID) holder of

Identity number..... have applied for allocation of an agricultural state land and hereby declare:

- (a) That the information provided herein is to the best of my knowledge true and correct. I understand that a false statement may disqualify me from any further consideration from DALRRD, without prejudice to any other rights or remedies available to DALRRD;
- (b) I am not disqualified by virtue of being a current or previous beneficiary of the land redistribution programme where I was allocated a property or farm, which was then abandoned, vandalised or where State assets were mismanaged, or funds provided by the State misused";
- (c) I understand that an application does not guarantee that land will be allocated to me, as there are still other processes to be followed before approval;

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

1. PROPERTY INFORMATION

PROVINCE		PROPERTY NAME	
DISTRICT		PROPERTY DESCRIPTION	
LOCAL MUNICIPALITY		PROPERTY REF NO	
		GPS COORDINATES	

2. 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"/> Household producer (Subsistence and vulnerable) <input type="checkbox"/> Smallholder Farmer <input type="checkbox"/> Medium Scale Commercial Farmer		
Types of Applicants	<input type="checkbox"/> Farm-Dweller <input type="checkbox"/> Farm Worker <input type="checkbox"/> Labour Tenant <input type="checkbox"/> Military Veteran <input type="checkbox"/> Youth <input type="checkbox"/> Women <input type="checkbox"/> Communal /Commonage Farmer <input type="checkbox"/> NARYSEC <input type="checkbox"/> Unemployed Agricultural Graduate <input type="checkbox"/> Persons with Disabilities <input type="checkbox"/> Other Specify		
Race Group of Applicant	<input type="checkbox"/> African <input type="checkbox"/> Indian <input type="checkbox"/> Coloured <input type="checkbox"/> South African Chinese		
Applicant cell no		Spouse Full Name	
Alternative cell/telephone no		Spouse ID	
Residential Address:		Spouse Employer	
Postal Address		Spouse Tel/Cell No	
Nearest Town		Residential address	
Municipality		Postal Address	
District		Province	
Province		Spouse Email Address	
Facebook/twitter account		Applicant preferred method of contact	SMS/ WhatsApp / Email/ Calls
Applicant Email Address		Business Email Address	
How long have you been living at 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			

3. 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"/> Temporary <input type="checkbox"/> Contract <input type="checkbox"/> Seasonal <input type="checkbox"/> Internship <input type="checkbox"/> NARYSEC <input type="checkbox"/> Volunteering <input type="checkbox"/> Other
Business activities (self-employed)	

Signature of applicant:

Date:



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"/> Primary <input type="checkbox"/> Matric	<input type="checkbox"/> Secondary <input type="checkbox"/> N1-N4 <input type="checkbox"/> N5-N6	<input type="checkbox"/> National Diploma (Technikon/University)	<input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Honours & Postgraduate <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

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)

4. LEGAL ENTITY INFORMATION

Are you applying as an entity	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	M	F
Number of members of the entity		
Number of Persons with disabilities (PWD's)		
18-35 yrs. (Youth)		
36-65 yrs.		
65 yrs. and above		
Total		
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"/> Other	
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+	
Legal Entity Registration Number		
Name Surname of Contact Person		
Postal Address of Entity		
Telephone:	Cell:	Email:

5. AGRICULTURAL ACTIVITY

Are you currently involved in Farming?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you pay rent where you farm	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Land ownership where you currently Farm	<input type="checkbox"/> Rented <input type="checkbox"/> Private/Family Farm <input type="checkbox"/> Commonage Land <input type="checkbox"/> State Land <input type="checkbox"/> Communal Land <input type="checkbox"/> Labour Tenant <input type="checkbox"/> Farm Dweller <input type="checkbox"/> Other (specify)



Signature of applicant:	
Date:	

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 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"/> 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

Type of farming enterprise	<input type="checkbox"/> Livestock <input type="checkbox"/> Crops <input type="checkbox"/> Mixed Farming
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Specify Type of Livestock or Crops	Number of Livestock	Hectares under production	Purpose for Production
			<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)
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Name of Grant	Government Department	Amount Received

CATEGORISATION OF PRODUCERS AS PER ANNUAL TURNOVER	CATEGORIES OF PRODUCERS	ANNUAL TURNOVER
Annual turnover received through farming enterprise	Household Producer (Vulnerable) classified as Indigent	<input type="checkbox"/> 0
	Household Producer (Subsistence)	<input type="checkbox"/> less than R50 000
	Small Holder Producer	<input type="checkbox"/> R50 001- R1 000 000
	Medium Scale Commercial Producer	<input type="checkbox"/> R1 000 001 and R10 000 000

What are you intending to use the land for?

Agricultural Enterprise	Type

Signature of applicant: _____
Date: _____

<input type="checkbox"/> Crop Production	<input type="checkbox"/> Grains <input type="checkbox"/> Sunflower	<input type="checkbox"/> Vegetable <input type="checkbox"/> Nuts	<input type="checkbox"/> Sugar cane <input type="checkbox"/> Other Specify	<input type="checkbox"/> Tobacco	<input type="checkbox"/> Cotton	<input type="checkbox"/> Tea
<input type="checkbox"/> Viticulture/Vineyards						
<input type="checkbox"/> Horticulture	<input type="checkbox"/> Fruits <input type="checkbox"/> Non-food crops (Grass)	<input type="checkbox"/> Herbs <input type="checkbox"/> Other(specify)	<input type="checkbox"/> Flowers <input type="checkbox"/> Medicinal plants	<input type="checkbox"/> Mushrooms	<input type="checkbox"/> Sprouts	
<input type="checkbox"/> Beekeeping						
<input type="checkbox"/> Animal Production	<input type="checkbox"/> Beef <input type="checkbox"/> Ostrich	<input type="checkbox"/> Dairy (cows) <input type="checkbox"/> Poultry (layers)	<input type="checkbox"/> Dairy (Goats) <input type="checkbox"/> Poultry (Broilers)	<input type="checkbox"/> Goat <input type="checkbox"/> Aquaculture	<input type="checkbox"/> Sheep <input type="checkbox"/> Other(specify)	<input type="checkbox"/> Pig
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"/> Access to Markets	<input type="checkbox"/> Implements <input type="checkbox"/> Agricultural Training	<input type="checkbox"/> Production Inputs	<input type="checkbox"/> Infrastructure	<input type="checkbox"/> Finance	<input type="checkbox"/> Other(specify)

For office use (Attach Deed Search information)

Land parcel Details		Province	
Farm Name		District Municipality	
Farm Number		Local Municipality	
Property Description		Current Commodity	
Portion		Proposed Commodity	
Registration Division		GPS Coordinates	
LPI Code			
Hectares/ Extent			
Farm Ref No			

Serial Number

Date Received	
Name Of Office	
Name of Receiving Official	

Signature of Receiving Official

Office Stamp

Signature of applicant:

Date: