

## NEW ENTRANTS SCHEME - STAGE 1 APPLICATION

Applicants must complete all relevant sections. Please read the Explanatory Booklet (NES 1) on the New Entrants Scheme before completing this form. Completed application forms to be returned to DARD, Orchard House, 40 Foyle Street, Derry/Londonderry BT48 6AT.

### Section 1: Personal details (please write clearly in ink in block capitals)

Business Reference Number: \_\_\_\_\_

Surname: \_\_\_\_\_ Forename: \_\_\_\_\_

Title: \_\_\_\_\_ DOB: \_\_\_\_\_  
(Mr/Mrs/Miss/Ms/Other) (Please provide original birth certificate)

Home address: \_\_\_\_\_  
\_\_\_\_\_

County: \_\_\_\_\_

Postcode: \_\_\_\_\_ Tel no: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Mobile no: \_\_\_\_\_

Is your business mainly or wholly in: SDA  DA  Lowland

SDA – Severely Disadvantaged Area DA – Disadvantaged Area  
Please tick appropriate box.

### Section 2: Please provide a brief overview of your proposal including what you plan to invest in and how much you intend borrowing.

Please tick if you wish to continue on a separate sheet

### Section 3. Eligibility criteria

Please tick as appropriate:

- i) Have you set-up as head of holding within the last 12 months? If yes, please provide supporting evidence. (refer to Section 2.1 of Explanatory Booklet)      yes       no
- ii) Is your holding viable? If yes, please provide supporting evidence. (refer to Glossary of Terms and Section 2.2 of Explanatory Booklet)      yes       no

### Section 4. Assistance with preparation of Business Plan (refer to Section 6 of Explanatory Booklet).

Do you wish to avail of CAFRE assistance (free of charge) to help you prepare your business plan.      yes       no

### Declaration and Undertakings

I have received and read the New Entrants Scheme - Explanatory Booklet (NES 1) and agree to comply with the conditions of the Scheme.

I declare that the information I have given in support of my application is true and complete to the best of my knowledge.

### Warning

If you knowingly or recklessly make a false application or submit false or misleading documentation in support of your application, you risk prosecution and the rejection of your application.

The information in this application form or any related inspection reports may be used in support of any function of the Department of Agriculture and Rural Development. This information may also be available to other Departments/Agencies for the purpose of preventing or detecting crime.

Some or all of the information provided by you may be disclosable under the Freedom of Information Act 2000.

**Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_

Official Use Only - Date Received

Official Use Only

Age	yes	no
Purpose	yes	no
Head of Holding	yes	no
Viable	yes	no

**Signed:** \_\_\_\_\_      **Date:** \_\_\_\_\_