



MINISTRY OF AGRICULTURE AND FOOD SECURITY
FARMER'S REGISTRATION FORM

Application Date: _____

Farmer Registration #.: _____

B'dos ID #: _____

VAT. #: _____ National Insurance #: _____

Full Name of Farmer: _____

Address of Farmer: _____ Farmer Parish _____

Farmer Date of Birth: _____ Gender _____

Telephone No: _____ No. of Dependents: _____ Spouse: _____ Children: _____

Farm Information (General)

Land Tax Reference #: _____ Size of Farm (acre) _____

Farm Location: _____ Farm Parish: _____

Name of Farm (where relevant): _____

Status of Farmer: _____

Tenure: _____

No. of Employees: Full-time: _____

Part-time _____ Seasonal: _____

Does farm have Irrigation facilities? _____

Area Irrigated (acres): _____

Type of Irrigation: Sprinkler (Acres) _____

Drip (Acres) _____

Type of Farming: _____

Of which Farmers' Co-operative/Associations are you a member? _____

Conditions

The issuance of the farmer's registration card can be denied if the necessary sanitary conditions are not met at the time of inspection.

Farm Enterprises:

Vegetables () Acres	Sugar Cane () Acres
Root Crops () Acres	Banana/Plantain () Acres
Legumes () Acres	Herbs/Spices () Acres
Cereals () Acres	Horticulture () Acres
Fruit Trees () Acres	Onions () Acres
Cotton () Acres	Pasture () Acres
Cattle (Adults) () No.	Pigs (Adults) () No.
Poultry () No.	Sheep (Adults) () No.
Rabbits (Adults)() No.	Goat(Adults) () No.
Apiculture (Hives) () No.	Aquaculture (Crop Area sq ft) () No.

Crops for Export Market

Vegetables	Root Crops	Fruits

Details of Livestock on Farm:

Species	Male		Female	
	Adult	Young	Adult	Young
Cattle		< 15 mths		< 15 mths
Sheep		< 6 mths		< 6 mths
Goats		< 6mths		< 6 mths
Pigs		< 6 mths		< 6 mths
Poultry (broilers)		< 6 mths		< 6 mths
Poultry (layers)		< 6 mths		< 6 mths
Rabbits		< 6 mths		< 6 mths
Other		< 6 mths		< 6 mths

Signature:

Date:

Copy above text,
Save file with this text
Use as subject for Email

Horses and other companion animals (cats and dogs) do not qualify for farm incentives.

Guidelines

All fields in red border should be filled. Save this file to your device using the text in the field with the RED background.

Attach this file to an email and send to PDFFORMS@agriculture.gov.bb with the filename as the subject.

NB -- It is important that the prefix "NFR_" is in the subject. If omitted it will result in the form not being received by the person who will process it.

Expected Outcome

Your farm operation will be inspected by an officer, who will make a recommendation of approval or rejection. If approved you will be required to visit the office at Graeme Hall to be photographed for your ID.

You will be contacted by phone or email to make the appointment for inspection. Please monitor your email from which you submitted this form and the phone number supplied on this form. Emails will come from "*username*"@agriculture.gov.bb, phone calls will come from 535-51xx. Please accept such calls from these numbers to expedite your application.