



Government of Arunachal Pradesh
Department of Agriculture
Naharlagun

Farmer Registration Form/Format for Data Collection
(For Farmer Database)

Passport Photo

Note: Farmers Credential filled up and ID Generated shall be a consolidated document restricted only for use by State Dept. of Agriculture and shall not be considered as a legal Document to stake claim over declared land.

(Fields marked with * are mandatory)

Voter ID No.*

AADHAAR No.*

Farmer Code*

Farmer Name*

Father's Name*

Date of Birth*

Block Name*

Village Name*

Pin code*

City Name*

Gender*

Marital Status*

Education Details* (Tick)

- Post Graduate
 Graduate
 Diploma
 10-Plus-2
 Matric
 Non-Matric
 Illiterate

Mobile No.*

Email

Ration Card No.

Khasra No. /Dag No

TIN Family ID

Bank A/c Name*

Bank A/c No.*

Bank Name & Branch*

IFS Code

Farm Machinery Details:

No. of Tractor

No. of Power Tiller

No. of Rotary Tiller

No of Paddy Dehusking Machine (PDM)

No. of Water Pump

No. of Mini Combine Harvester

No. of Hand operated Winnowing

No. of Paddy Transplanter

No. of Reaper

No. of Solar photovoltaic water pump

No. of Mini flour mill (Atta Chakki)

No. of Power sprayer

Farm Details

Farm Size* (in Ha.)

Annual Income from Farm Activities* (In Lakhs)

Field Type Classification* (Tick)

- Jhum Land
- Non-Terraced Slope Land
- Terraced Farm
- WRC/Flat Land

Crop Grown*

- Cereals/Food Crops
- Coffee
- Fiber Crops
- Fisheries
- Fruit Plantation
- Livestock farming
- Oil Palm Plantation
- Oil Seeds
- Pulses
- Rubber Plantation
- Spices and Condiments
- Tea Plantation
- Vegetables

Irrigation Infrastructure Details* (Tick)

- Channel Irrigation
- Drip irrigation
- Dugout Irrigation
- Rain-Fed Irrigation
- Sprinkler irrigation
- Water Tank

Type of Ownership* (Tick)

- Lease
- Self
- Share

Manpower for Farming

- Both-self & hired
- Hired
- Self

Nearest market for purchase of agril. Inputs/sales of farm produce

I DO HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE & BELIEF. I FURTHER DONOT HAVE ANY OBJECTIONS ON USAGE OF MY CREDENTIALS FOR DEPARMENTAL RECORDS

Place:

Date:

Signature/Thump Impression of Farmer

FOR OFFICE USE ONLY

This is to certify that the credentials as stated herein by the farmer/applicant has been verified and found authentic.

Signature:

Counter Signed By DDA:

ADA/ADO/AFA

Name:

Place:

District:

Name:

Place:

District: