



**Directorate of Fisheries
Government of Goa**

Dayanand Bandothkar Marg, Panaji Goa.

Tel: (0832) 2224838 Tel: (Dir) 2227780 Fax: (0832)2231049 Email: dir-fish.goa@nic.in.

**APPLICATION FORM FOR FINANCIAL RELIEF TO VICTIMS OF
NATURAL CALAMITIES FOR FISHERMEN OF STATE**

1.	Name of the Applicant	
2.	Father's/ Spouse's name :-	
3.	Age of the Applicant :-	
4.	Permanent Address of Applicant	
	a) House No.:	c) Village :-
	b) Ward /Waddo:	d) Taluka :-
5.	Biometric/ Temporary I- Card No. of applicant	
6.	Name of the Bank and Account No. (Encl :- Mandate Form)	
7.	Details of Contribution to Fishermen Corpus Fund by applicant	
	Year	Amount Contribution
	2014-15	
	2015-16	
	2016-17	
	2017-18	
	2018-19	
8.	Details of loss of fishing equipments like Net/OBM/Fishing Vessel	
A.	NET	
I	Type of Net :-	
II	Registration No. of Net	
III	Copy Of Fishing Net Licence	
IV	Total loss/partial damage as assessed by competent authority (Encl: Loss Assessment Report)	
B.	Out Board Motor	
I	Type of OBM (Petrol/Kerosene)	
II	Engine No.	
III	Date of incorporation of O.B.M. on V.R.C. (Encl :- copy of VRC)	
IV	Total loss/partial damage as assessed by competent authority (Encl: Loss Assessment Report)	

C	Canoe/Trawler/Purse-seiner	
I	Reg. No. of Fishing Vessel (Encl: Copy of V.R.C.)	
II	Year of Registration	
III	Fishing vessel licence of current year	
IV	Total loss/Partial damage as assessed by competent authority (Encl: Loss Assessment Report)	
9.	Whether belongings were insured:-	
10.	Date and Time of incident occurred	
11.	In case of Death of Victim Give details : Enclosed missing report/Death certificate/Post mortem report	
A	Whether applicant is insured	Yes/No
B	In case of total disability of the victim. Give details (Encl :- Medical Certificate)	
C	In case of Partial disability of the victim. Give details (Encl :- Medical Certificate)	
12.	Copy of Panchanama report enclosed	Yes/No
13.	Copy of F.I.R. enclosed	Yes/No
14.	Inspection Report of fishing vessel from Fisheries Officer enclosed	Yes/No
15.	Loss Assessed Report from Authorized Marine Surveyor enclosed	Yes/No
16.	Weather Report from meteorological Department on the day of incident occurred enclosed	Yes/No

Place :-
Dated :-

Signature or thumb
Impression of the Applicant

DECLARATION

I hereby, solemnly declare that the particulars mentioned above in my application for the financial relief from natural calamity are true, and correct to the best of my knowledge and belief for the purpose applied.

In case the application furnished by me is found to be false then I agree that the application is liable to be rejected.

Place :-

Dated :-

Signature or thumb
Impression of the applicant.

ENCLOSURES :-

- 1) Photograph of the applicant
- 2) Copy of Vessel Registration Certificate
- 3) Copy of updated fishing licence certificate
- 4) Copy of updated Fishing net licence
- 5) Copy of updated Fishing net book.
- 6) Copy of Biometric Card/Temporary ID Card
- 7) Inspection report of Registered Fishing Vessel/ OBM/net in original.
- 8) Copy of Bank Pass book alongwith mandate form
- 9) Statement of contribution for Fishermen Corpus Fund by applicant
- 10) Post mortem report/ missing report/ Death Certificate
- 11) Panchanama Report
- 12) F.I.R. Report
- 13) Copy of Medical certificate
- 14) Copy of Loss Assessment Report from Authorized Marine Surveyor
- 15) Copy of Weather Report from meteorological Department on the day of incident occurred

FOR USE OF F.S./F.O./A.S.F. AT HEAD OFFICE

The application is scrutinize and found in order as per the pattern of the assistance and the guidelines of the scheme.

Remark : 1.....

2.....

Name and signature of dealing hand