## Ministry of Agro-Industry And Food Security Head Office - Port-Louis - Land Conversion Unit

## **Application for Land Conversion Permit**

•	*** Note: Prior	to fil	ling	the 1	form	ı, re	ad c	care	eful	lly p	oara	grap	oh 9		To b	oe s	sub	mit	ted i	n 9	Сс	pies
1.	For Official Use																					
	Applicant Id:		5			Ap <sub>10</sub>	plica	tion	No	<b>.</b> 15			20	5	D	ate	of A	ppli	catio	n (se	∍е ра	age 4)
	File Ref No:									13									И	I		
	Form Verified by:							Gra	ade	:						Da	te:					
_	Data Captured by:							Gra	ade	:						Da	te:					
2.	Main Applicant's Do	etails																				
	NID	: [	1		5			10			14											
	Sex		1			6					[	Date	of B	irth:						I		10
	Title	: [							(Cc	omp	App any/S		nt Ty etv/In		ual/C	Co-C	)wn		eirs/e	etc		
N	OTE: For Individual, ( For Companies,							r Su	ırna	ıme	and (	Othe	r Na	mes	of M	ain <i>i</i>	Арр	licar	nt;			<b>e</b> .
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	Surname:	1		5			10				15			20				25			30	
	Other Names:	1		5			10	Щ			15			20				25			30	
	Company Name:			3							15			20				25			30	
	Director:	1		5			10		Ī		15			20				25			30	
	Flat/Block/Appt No:	1		6																		
	Street No/Name:	1		5			10				15			20				25		L	30	
	Locality:			5			10				15			20				25			30	
	Town/Village:				6				1			5	7				1			5		
	Post Code:					Tel	No:							Fa	x No	: [				Ĭ		
	E-Mail:																					

3(i) Details of Land to be converted							
Street/Road:							
Locality: 1 5 10 15 20 25 30							
District:							
Transcription No. of Title Deed: TVNo Deed Date:							
Area as per Title Deed:							
Area to be converted:  M 2							
3(ii) Present Cultivation - Is land to be converted presently under cultivation? ☐ ( ✓ for Yes)							
If yes, then fill in the following:-							
ocation Land Use Div SIFB A/C No Factory Area Crops Grown Tobacco Board							
3(iii) Past Cultivation - If land is not presently under cultivation, has it been under cultivation at any							
point in time during the past 10 years immediately preceding the effective date of this aplication. ( * for Yes)							
ocation AREU Reg No SIFB A/C No Factory Area Crops Grown Tobacco Board							
Location ARED Reg No. SIEB AC NO. 1 actory Area. Crops Grown Tobacco Board							
Date last harvested:							
Name of present owner:							
3(iv) Is the Land to be converted in an irrigation area?							
4. Land Details - Larger Plot and Other uses of agricultural land							
(a) Did land to be converted form part of a larger plot as at 01 January 1981?  ( * for Yes )  1							
Name of Owner of larger plot:							
Area of larger plot:  M <sup>2</sup>							
Was the land excised or sub-divided for agricultural purpose? ( for Yes )							
Date of excision/sub-division:							
For Official Use Land Category:							

5. Have you put any agricultural land to other uses in the past?								
If yes, please indicate area converted, location, TV No. and land conversion tax paid (if applicable) and								
reference no. of your previous application:								
G. De verrouieb to be exempted from neumant of land Commission Torring according with a constitution								
6. Do you wish to be exempted from payment of Land Conversion Tax in accordance with any provision of section 29 of the SIE Act 2001 (copy of relevant extract is attached).								
If yes, please specify relevant subsection								
7. Purpose of Conversion								
For Official use								
Scheme:								
Main Purpose of Conversion:								
Sub Purpose of Conversion:								
Purpose Remarks:								
Applicant/s to give an indication of the purpose of conversion								
A. Residential (i) (a) own use								
(b) subdivision among )								
(i) heirs )								
(ii) ascendant/descendant ) Tick as appropriate ( ♥ for Yes)								
(iii) co-owners )								
(c) morcellement )								
(d) others )								
If conversion is for (b) please submit names, ID Number and lots allocation and indicate whether								
beneficiaries are owners of a residence or a residential plot of land elsewhere.								
(ii) Are you already the owner of a residence?								
(iii) Are you the owner of any other residential plot of land?								
B. INDUSTRIAL (Specify the type of industry):-								
(Clearance of the Ministry of Industry should be attached)								
C. TOURISTIC (Specify type of development):-								
(Clearance of the Ministry of Tourism should be attached)								
D. AGRO INDUSTRIAL (Specify type):								

E	E. APPROVED HOUSING SCHEME (Give details):-								
		(Whether a housing development company or a scheme in favour of workers of a sugar factory)							
F	F.	COMMERCIAL (Specify type):-							
(	G.	OTHERS (Specify): -							
8. DECLARATION									
1	H	EREBY DECLARE THAT ALL PARTICULARS GIVEN IN THIS APPLICATION FORM AND IN THE CUMENTS ANNEXED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE DELIEF AND THAT I HAVE NOT WILLFULLY SUPPRESSED ANY RELEVANT INFORMATION.							
9.	ı	NOTE							
	(1) This Ministry will not consider applications where								
	(a) application forms are not properly filled								
	(b) information is missing or inaccurate								
	(c) all relevant documents including clearances are not submitted along with the application forms and								
	(d) the site/location plan does not satisfy conditions as per Registration Duty Act and International System of Units (SI Units).								
(		Any application for Land Conversion Permit may be made by the owner of the land jointly with any other person/s where it is proved to the satisfaction of the Minister that the owner cannot alone comply with all of the undertakings specified in sections 11 and 29 (1) (c), (ii); (d), (e) or (f) of the Sugar Industry Efficiency Act as the case may be, and those undertakings will be given and complied with jointly and severally by the owner and that other person/s.							
N Q	Mir 9th ⊃o	Date: (same as date of application on page 1)  nistry of Agro-Industry and Food Security floor Renganaden Seeneevassen Building rt-Louis No: 207-0625 (Ext 1937)							
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In case there are co-applicants, please fill in the additional page(s).

## **Co-Applicants Details**

1. NID: 1 5 10 14	Surname:
Other Names:	
Are you owner of a residence or a reside	ential plot of land?
Tel No:	Signature:
2. NID: 1 5 10 14 Other Names:	Surname:
Are you owner of a residence or residence or a residence or a residence or a residence or a resi	ential plot of land?
3. NID: 1 5 10 14	Surname:
Other Names:	
Are you owner of a residence or a reside	ential plot of land? ( ✓ for Yes )
Tel No:	Signature:
4. NID: 1 5 10 14	Surname:
Other Names:	
Are you owner of a residence or a reside	ential plot of land? ( ✓ for Yes )
Tel No:	Signature:
5. NID: 1 5 10 14	Surname:
Other Names:	
Are you owner of a residence or a reside	ential plot of land? ( ✓ for Yes )
Tel No:	Signature: