



MINISTRY OF AGRO INDUSTRY AND FOOD SECURITY

IMPLEMENTATION AGENCY: AGRICULTURAL MARKETING BOARD

**FREIGHT REBATE SCHEME**

**APPLICATION FORM FOR REFUND OF FREIGHT**

**PART I : EXPORTER'S DETAILS**

1. Name : .....
2. Address : .....
3. Telephone No : ..... Fax No. : .....
4. Contact Name : .....
5. Tax A/C No : ..... 6. AMB Reg No: .....

**PART II : COMMODITY EXPORTED**

Commodity	Country Exported To	Net Quantity Exported (Kgs)	Value FOB/CIF (Rs)	Gross Weight (incl. packaging) (Kgs)	Freight Paid (Rs)

**Note: All above columns must be duly filled.**

**DATE OF EXPORTATION:** ..... (No applications will be entertained if date of export is more than 60 days).

**PART III : DOCUMENTARY EVIDENCE TO BE SUBMITTED**

<b><u>MANDATORY DOCUMENTS</u></b>		<b>REFERENCE NUMBER</b>	<b>VERIFIED</b>
<b>a</b>	Exporter's Invoice		
<b>b</b>	Airway Bill		
<b>c</b>	Memorandum		
<b>d</b>	Bill of Entry for Export		
<b>e</b>	Producers' receipts/ Agreements with producers		

<b><u>OPTIONAL DOCUMENTS</u></b>	<b>SUBMITTED (YES/NO)</b>
Packing List	
Export Permit	
Certificate of Origin	
Original Bank Advice	
Phytosanitary Certificate	

**PART IV : PRODUCERS' DETAILS**

Name	Address	SFWF Planter Registration Number	Location of plantation	Tax Account Number	Quantity Supplied (Kgs)	% weight out of Total Exported

**Note: All above columns must be duly filled.**

**PART V : BANK ACCOUNT DETAILS OF PRODUCER(S)**

<u>Name of producer</u>	<u>Bank Name</u>	<u>Branch</u>	<u>Account Name</u>	<u>Bank Account Number</u>

**Note: All above columns must be duly filled.**

**PART VI : DECLARATION**

I hereby declare that the particulars given in this application are to the best of my knowledge and belief, true and correct. I also declare that no information has been withheld or suppressed by me.

**DATE:** .....

**SIGNATURE:** .....

**SEAL:**

***Calculations – OFFICE USE ONLY***

(a) TOTAL FREIGHT PAID : ..... (b) 25% of TOTAL FREIGHT PAID : .....

(c) EXPORTER'S REBATE : (b) / 2 = .....

(d) PRODUCERS' REBATE : (b) / 2 x % supplied .....