



**Application form for incentives for Rural Tourism Fair under
Maharashtra Tourism Policy (MTP) – 2024**
(Section 14.4.9 under MTP 2024)

| | |
|--|--|
| Application Number (For Office Use) | |
| Date of Receipt (For Office Use) | |

General Details

1. Name of Applicant/
Organization

2. Address of the Applicant/
Organization

*Photo of the
Applicant*

Exhibition Details

1. Name of Fair

2. Fair Dates: Start Date - _____

End Date - _____

3. Venue Details:

| | |
|---------|--|
| Name | |
| Address | |
| City | |
| Pincode | |

4. Description of the event

5. Total Number of Stalls: _____
6. Target Audience: _____
7. Estimated number of attendees: _____

Financial Information

1. Total cost of exhibition: _____
2. Details of Expenses
 - a. Venue Cost: _____
 - b. Rental cost per stall: _____
 - c. Marketing: _____
 - d. Staff/Volunteers: _____
 - e. Equipment Rental: _____
 - f. Others (Specify): _____

3. Source of Funding
 - a. Own funds: _____
 - b. Sponsors: _____
 - c. Others (Specify): _____

Bank Account Details

| | |
|----------------|--|
| Bank Name | |
| Branch Name | |
| Account Number | |
| IFSC Code | |

| Enclosures:- Tick mark necessary documents enclosed with the application form | | | |
|--|------------------------------|----------------|--|
| Document Type | | | |
| <input type="checkbox"/> | Aadhar card of the applicant | Doc No: | |
| | | Date of Issue: | |
| <input type="checkbox"/> | Utility Bills | Doc No: | |
| | | Date of Issue: | |

| | | |
|---|-------------------------------------|---------------|
| <input type="checkbox"/> | Details of Previous Event (If any) | |
| <input type="checkbox"/> | Detailed event Proposal | |
| Other Documents (Specify name and other details in the space provided below) | | |
| 1 | | Doc No |
| | | Issue Date |
| | | Validity Date |
| 2 | | Doc No |
| | | Issue Date |
| | | Validity Date |

Declaration

I/We declare that the information given above is correct and verified by me. If found otherwise, we will be liable to refund the subsidy availed with interest.

Date:

Name of Signatory:

Place:

Designation:

Signature: