## **Biological control laboratory**

## Format for submission of project by Public Sector under NHM

(The proposal should be routed through State Horticulture Mission with their recommendation)

- 1. Name and address of the organization.
- 2. Name of the project/ activity.
- 3. Name and address with telephone number of the key person, who will be in charge of Implementation of the project
- 4. Brief background of the project/activity
- 5. Objectives.
- 6. Location of the project and availability of building for the purpose with documents.
- 7. Findings of any study in support for creating a facility in the area.
- 8. Component wise cost of project supported by quotation/document including source of funding.
- 9. Area of operation with special reference to NHM Districts.
- 10. Details of diseases and pests prevalent in the area.
- 11. Pathogens and predators to be multiplied in the lab with clear details of protocols established in each case.
- 12. Source of initial material like Trichogramma, trichoderma chrysoperla,NPV etc..
- 13. Laboratory should be located in an area, which is easily accessible to farmers.
- 14. Approximate cost per unit of pathogen that will be available to farmer.
- 15. List of Districts, Talukas, villages to be covered by the activity
- 16. No. of farmers to be benefited.
- 17. Economics of project vis-à-vis unit cost, profitability and cost at which inputs will be made available to farmers. Total requirement of predators and pathogens. Capacity of production.

- 18. Certificate stating that the subsidy other than NHM has not been availed.
- 19. Social benefits
  - (a) Direct employment
  - (b) Indirect employment
  - (c) Any other
- 20. Commitment of the organization for deployment of experts and staff to this project for continuity and accountability.
- 21. Details of the sustainability of the project with special reference to its capacity to generate income, as only one time grant is available.
- 22. SWOT analysis.
- 23. Implementation schedule.

(Signature of the incharge), (Signature of the Head of Department/Director Institution), (Signature of Comptroller/Financial Adviser)