|  |  |
| --- | --- |
| logoSAGARPA_hoz.png | logo coahuila.png SECRETARIAS - SEDER-02.png |
| **ANEXO I**  Solicitud Única de Apoyo | |

**1. DATOS DE VENTANILLA:** N° de Folio

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

**PROGRAMA:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Concurrencia con las Entidades Federativas |  | Productividad Rural |  | Apoyos a Pequeños Productores |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Componente | Instancia Ejecutora | Edo | Municipio | Ventanilla | De recepción | | | Consecutivo |
| Día | Mes | Año |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**1.1 No. de identificación o registro en padrón 1/**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ¿Está usted registrado en el SURI, en el Padrón Ganadero Nacional, u otro padrón, o es beneficiario de PROAGRO Productivo (antes PROCAMPO), de PROGAN, de energéticos marinos y ribereños, tiene número de unidad pecuaria, o de otro Componente?, | | | | | | |
| Sí |  | No |  | respuesta sea: “Sí” indicar en cuál | |  | |
|  | | | | | | |
| y proporcionar su número de identificación o folio (S): | | | | |  | |

Para el caso de incentivos para el sector pesquero y acuícola, es imprescindible proporcionar lo siguiente:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| RNP (Unidad Económica) |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No. de permiso o concesión de pesca o acuacultura |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. DATOS DEL SOLICITANTE** | MUJER |  | HOMBRE |  | INDIGENA |  | JOVEN |  |

**2.1 Persona física**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| RFC: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| \* CURP: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nombre (s): | | |  | | | | | | |  | | |  | |  | | | |  |  |  |  |  |  | |
| Primer Apellido | | | | |  | | | | |  | | | d | | d | | | | m | m | a | a | a | a | |
| Segundo Apellido | | | | |  | | | | |  | | | Fecha de Nacimiento | | | | | | | | | | | | |
| Nacionalidad: | | |  | | | | | | Estado de Nacimiento: | | | | |  | | | | | | | | | | |
| Sexo: |  | | | | |  | | | Estado Civil: | |  | | | | | |  | | | | | | | |
| Teléfono (Lada): | | | |  | | | |  | | | | | | | | | | | | | | | | |
| Teléfono Celular: | | | |  | | | | | Correo Electrónico: | | |  | | | | | | | | | | | | |
| Fax: |  | | | | | |  | | | | | | | | | | | | | | | | | |
| \*Tipo de identificación Oficial: | | | | | | |  | | Número de la identificación: | | | | | | |  | | | | | | | | |
| Edad: | |  | | | |  | | | | | | | | | | | |  | | | | | | |

**2.2 Persona moral y Grupo Informal (RFC no aplica para Grupo Informal)**

|  |  |
| --- | --- |
| \*Nombre de la persona moral: |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| \*RFC: |  |  |  |  |  | |  | |  | |  | |  | |  |  | | \*Homoclave: | | | | |  | |  |  |
|  |  |  |  |  |  | |  | |  | |  | |  | |  |  | | | |  | | | | | | | | | | |  | |  | |  | |
| Fecha de registro al RFC | | | | | |  | |  | |  | |  | |  | | |  | |  | |  | Fecha de constitución | | | | | | |  |  | |  | |  | |  | |  |  |  |
| d | | d | | m | | m | | a | | | a | | a | | a |  | | | | | | | d | d | | m | | m | | a | | a | a | a |
| Teléfono: |  | | | | | | | | | | | | | | | | | | | | | | | Correo electrónico | | | |  | | | | | | | | | | | | |

|  |  |
| --- | --- |
| Objetivo social de la persona moral: |  |
|  | |

Beneficiarios:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Jóvenes | 18-29 años |  |  | Indígenas |  |
| Adultos | 30-59 años |  |  | Discapacitados |  |
| Adulto Mayor | 60 en adelante |  |  |  |  |
|  |  |  |  |  |  |
| Socios |  |  |  |  |  |
| No. de socios mujeres | |  |  |  |  |
| No. de socios hombres | |  |  |  |  |
|  |  |  |  |  |  |
| Total de socios físicos | |  |  |  |  |
|  |  |  |  |  |  |
| No de socios morales | |  |  |  |  |
|  |  |  |  |  |  |
| Total de socios |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ¿Pertenece a alguna organización del Sector Agroalimentario? | | Si |  | No |  |
|  | | | | | | |
| ¿Cuál? |  | | | | | |

|  |  |
| --- | --- |
| **2.2.2. DATOS EN CASO DE ORGANIZACIÓN, INSTITUCIÓN, ÓRGANO COLEGIADO, ETC.** | |
| (En su caso) Nombre: |  |

|  |  |
| --- | --- |
| *Deberá incluir relación de integrantes, con sus datos generales* | |
| CLUNI: |  |

***2.2.2 Representante legal***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Nombre del representante legal (1): | |  | | |  | Sexo: |  |
| Primer Apellido |  | |  |
| Segundo Apellido |  | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CURP: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| RFC |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Teléfono: |  | | | | | Nacionalidad: |  | |
|  | | | | | | | | |
| Tipo de Identificación oficial: | | |  | | | No. de identificación oficial: | |  |
|  | | | | | | | | |
| Documento de acreditación del Representante Legal: | | | |  | | | | |
|  | | | | | |  | | |
| Testimonio Notarial del Poder y número de testimonio: | | | | |  | | | |
|  | | | | | |  | | |
| Vigencia del Poder: | |  | | | | | | |
|  | | | | | | | | |

**2.2.2.1 Domicilio del Representante Legal:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Tipo de domicilio: | | | | | Urbano | | | | | | | | |  | | | | | | Rural | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tipo de asentamiento humano: | | | | | | Colonia ( ) | | | | | | | Fraccionamiento ( ) | | | | | Manzana ( ) | | | | | Pueblo ( ) | | | | | | Rancho ( ) | |  | | | Granja ( ) | | | | | | | | Ejido ( ) | | | | | | Hacienda ( ) | | | | | Otro ( ) | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nombre del asentamiento humano: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tipo de vialidad: | | Avenida ( ) | | | | | | | | Boulevard ( ) | | | | | | Calle ( ) | | | | | Callejón ( ) | | | | | | Calzada ( ) | | | |  | | Periférico ( ) | | | | | | | | | Privada ( ) | | | | | | Carretera ( ) | | | | | Camino ( ) | | | | | | Otro ( ) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nombre de la vialidad: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Estado: |  | | | | | Municipio: | | | | | |  | | | | | | | Localidad: | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Número Exterior 1: | | |  | | | | | | | | Número Interior | | | | |  | | | | | | Código Postal | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Referencia 1 (entre vialidades) | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | | Referencia 2 (vialidad posterior): | | | | | | | |  | | | | | | | Referencia 3 (descripción de ubicación: | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

***2.2.3 Representante legal (2) En su caso***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Nombre del representante legal (1): | |  | | |  | Sexo: |  |
| Primer Apellido |  | |  |
| Segundo Apellido |  | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CURP: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| RFC |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Teléfono: |  | | | | | Nacionalidad: |  | |
|  | | | | | | | | |
| Tipo de Identificación oficial: | | |  | | | No. de identificación oficial: | |  |
|  | | | | | | | | |
| Documento de acreditación del Representante Legal: | | | |  | | | | |
|  | | | | | |  | | |
| Testimonio Notarial del Poder y número de testimonio: | | | | |  | | | |
|  | | | | | |  | | |
| Vigencia del Poder: | |  | | | | | | |
|  | | | | | | | | |

**2.2.3.1 Domicilio del Representante Legal:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Tipo de domicilio: | | | | | Urbano | | | | | | | | |  | | | | | | Rural | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tipo de asentamiento humano: | | | | | | Colonia ( ) | | | | | | | Fraccionamiento ( ) | | | | | Manzana ( ) | | | | | Pueblo ( ) | | | | | | Rancho ( ) |
|  | | | Granja ( ) | | | | | | | | Ejido ( ) | | | | | | Hacienda ( ) | | | | | Otro ( ) | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nombre del asentamiento humano: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tipo de vialidad: | | Avenida ( ) | | | | | | | | Boulevard ( ) | | | | | | Calle ( ) | | | | | Callejón ( ) | | | | | | Calzada ( ) | | |
|  | | Periférico ( ) | | | | | | | | | Privada ( ) | | | | | | Carretera ( ) | | | | | Camino ( ) | | | | | | Otro ( ) | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nombre de la vialidad: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Estado: |  | | | | | Municipio: | | | | | |  | | | | | | | Localidad: | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Número Exterior 1: | | |  | | | | | | | | Número Interior | | | | |  | | | | | | Código Postal | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Referencia 1 (entre vialidades) | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | |
|  | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | |
| Referencia 2 (vialidad posterior): | | | | | | | |  | | | | | | | Referencia 3 (descripción de ubicación: | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**2.2.4 Señalar tipo de persona (aplica para Persona Física, Moral y/o Grupo Informal)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Indígenas |  | Tercera Edad |  |  |

**2.2.5 Actividad Económica**

|  |
| --- |
|  |

**2.3 Domicilio del solicitante (Persona Física u Otro)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Tipo de domicilio: | | | | | Urbano | | | | | | | | |  | | | | | | Rural | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tipo de asentamiento humano: | | | | | | Colonia ( ) | | | | | | | Fraccionamiento ( ) | | | | | Manzana ( ) | | | | | Pueblo ( ) | | | | | | Rancho ( ) | |  | | | Granja ( ) | | | | | | | | Ejido ( ) | | | | | | Hacienda ( ) | | | | | Otro ( ) | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nombre del asentamiento humano: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tipo de vialidad: | | Avenida ( ) | | | | | | | | Boulevard ( ) | | | | | | Calle ( ) | | | | | Callejón ( ) | | | | | | Calzada ( ) | | | |  | | Periférico ( ) | | | | | | | | | Privada ( ) | | | | | | Carretera ( ) | | | | | Camino ( ) | | | | | | Otro ( ) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nombre de la vialidad: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Estado: |  | | | | | Municipio: | | | | | |  | | | | | | | Localidad: | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Número Exterior 1: | | |  | | | | | | | | Número Interior | | | | |  | | | | | | Código Postal | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Referencia 1 (entre vialidades) | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | | Referencia 2 (vialidad posterior): | | | | | | | |  | | | | | | | Referencia 3 (descripción de ubicación: | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**3. DATOS DE LA CUENTA BANCARIA (Solo a los componentes que les aplica según requisitos específicos)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Institución Bancaria: |  | | | No. de Cuenta: | |  |
| Cuenta interbancaria CLABE: | |  | Sucursal, plaza y ciudad | |  | |

**4. DATOS DEL PROYECTO, UNIDAD ECONÓMICA O PREDIO. (Sólo a los componentes que les aplica según requisitos específicos)**

|  |  |
| --- | --- |
| Nombre del proyecto: |  |

Tipo de proyecto:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Nuevo |  |  | Continuación |  |

|  |  |
| --- | --- |
| Objetivo del proyecto: |  |

*“Cuando no requiere proyecto, llenar los datos de ubicación del predio o unidad de producción en el que se aplicarán los incentivos”*

**4.1 Ubicación del Proyecto:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Tipo de domicilio: | | | | | | Urbano | | | | | | | |  | | | | | | Rural | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tipo de asentamiento humano: | | | | | | | Colonia ( ) | | | | | | Fraccionamiento ( ) | | | | | Manzana ( ) | | | | | | Pueblo ( ) | | | | | | Rancho ( ) | |  | | | | Granja ( ) | | | | | Ejido ( ) | | | | | Hacienda ( ) | | | | | | | | | Otro ( ) | | | | | |  | | |  | | | |  | | | | | |  | | | |  | | | | | | | | |  | | | | | |  | | | Localidad: | |  | | | | | | | |  | | | | Nombre del asentamiento humano | | | | | | | | |  | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | Tipo de vialidad: | | | Avenida ( ) | | | | | | | Boulevard ( ) | | | | | | | Calle ( ) | | | | | Callejón ( ) | | | | | | Calzada ( ) | | | |  | | | Periférico ( ) | | | | | | Privada ( ) | | | | | | Carretera ( ) | | | | | | | | Camino ( ) | | | | | | Otro ( ) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nombre de la vialidad: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Estado: |  | | | | | | Municipio: | | | | |  | | | | | | | Localidad: | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Número Exterior 1: | | | |  | | | | | | | Número Interior | | | | | |  | | | | | | Código Postal | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Referencia 1 (entre vialidades) | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | Referencia 2 (vialidad posterior): | | | | | | | |  | | | | | | | | Referencia 3 (descripción de ubicación): | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Superficie |  | ha (total de predio) |
| Superficie |  | ha (a sembrar) |

Coordenadas geográficas (ubicar un punto al interior del predio en donde se realizará el proyecto):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Latitud N: |  | Longitud: |  | Elevación: |  | msnm. |

**Nota: En varios componentes se requiere especificar los siguientes campos; ciclo, cultivo, superficie sembrada, año, para que se evalúe.**

**5. COMPONENTES e INCENTIVOS (CONCEPTOS DE APOYO) SOLICITADOS:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **5.1 Apoyo solicitado** | | | | **Monto en pesos** | | | | | |  |  |
| Concepto de apoyo solicitado | Subconcepto de apoyo solicitado | Unidad de medida | Cantidad Solicitada | Apoyo federal solicitado | Apoyo estatal solicitado | Aportación del Productor | Otras fuentes de financiamiento | | Inversión TOTAL | Descripción  (opcional) |
| Crédito | Otro apoyo gubernamental |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ¿Recibió incentivos o apoyos de los programas o componentes de la SAGARPA y la Secretaria de Desarrollo Rural en años anteriores? | | | | |
| SÍ | NO | ¿Cuál(es) Programa(s) o componente(s)? | Monto | Año |
|  |  |  |  |  |
|  |  |  |  |  |

**6.1 CRITERIOS :**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criterios de selección, calificación y dictamen** | **Aplica SI o NO** | **Cantidad del Índice** | | **Puntos** |
| Incremento de la producción. |  |  | **%** |  |
| Valor Agregado a la producción. |  |  | **%** |  |
| Mayor número de empleos directos. |  |  | **No.** |  |
| Mayor número de beneficiarios directos. |  |  | **No.** |  |
| **Nombre de la localidad / Índice de CONAPO, (grado de marginación).** | | | | |
|  |  |  | **Grado** |  |
| **Total de puntos obtenidos** | | | |  |

**6.2 Requisitos específicos en su caso, correspondientes al componente (copia simple y original para cotejo):**

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| **Requisito** | **Sí** | **No** |
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**7. DECLARACIONES DEL SOLICITANTE**

Declaro bajo protesta de decir verdad:

a) Que no realizo actividades productivas ni comerciales ilícitas.

b) Que estamos al corriente con las obligaciones requeridas por la SAGARPA en las presentes Reglas de Operación.

c) Que aplicaremos los incentivos únicamente para los fines autorizados, y que, en caso de incumplimiento por nuestra parte, la consecuencia será la devolución del recurso y los productos financieros; así como la pérdida permanente del derecho a la obtención de incentivos de la SAGARPA.

d) Que estoy al corriente en mis obligaciones fiscales. Sí ( ) No ( )

e) Que estoy exento de obligaciones fiscales. Sí ( ) No ( )

f) Con fundamento en el artículo 35 de la Ley Federal de Procedimiento Administrativo acepto la recepción de notificaciones relacionadas con la presente solicitud a través de la página electrónica de la Secretaría de Desarrollo Rural y/o de la página electrónica del municipio en caso de ser Municipalizado, la cual me comprometo a revisar periódicamente.

g. Para PRODEZA y COUSSA además tenencia de la tierra, población total de la localidad apoyada o la que se apoyará, población económicamente activa, número de mujeres y hombres.

h) Conforme a lo establecido en las presentes Reglas de Operación de la Secretaría de Agricultura, Ganadería, Desarrollo Rural, Pesca y Alimentación, manifiesto bajo protesta de decir verdad que no he recibido o estoy recibiendo incentivos de manera individual u organizada para el mismo concepto del Programa, Componente u otros programas de la SAGARPA, que impliquen que se dupliquen incentivos para el mismo concepto de este programa (salvo que se trate de proyectos por etapas).

i) Manifiesto que los datos son verídicos y me comprometo a cumplir con los ordenamientos establecidos en las Reglas de Operación y Lineamientos correspondientes, así como de toda la legislación aplicable.

j) Expreso mi total y cabal compromiso, para realizar las inversiones y/o trabajos que me correspondan, para ejecutar las acciones del proyecto aludido hasta la conclusión.

k) Eximo a la Secretaría de toda responsabilidad derivada del depósito del importe del incentivo que se me otorgue, [en la cuenta bancaria que se precisa con antelación], toda vez que los datos que de ella he proporcionado son totalmente correctos y vigentes, en cuanto la Secretaría efectúe los depósitos del importe que me corresponda, me doy por pagado. En caso de reclamación del depósito, para comprobar que el pago no se ha efectuado, me comprometo a proporcionar los estados de cuenta emitidos por el banco que la Secretaría requiera; con este documento me hago sabedor de que la Secretaría se reserva el derecho de emitir el incentivo mediante otra forma de pago; cuando así lo determine autorizo al banco para que se retire los depósitos derivados de los programas de la Secretaría efectuados por error en mi cuenta, así como los que no me correspondan o los que excedan al incentivo al que tengo derecho y sean reintegrados a la cuenta bancaria del Programa correspondiente.

l) La entrega de la presente solicitud, así como de la documentación solicitada, no implica aceptación u obligación del pago de los incentivos por parte de la Secretaría, los órganos sectorizados y las instancias ejecutoras.

m) La entrega de la presente solicitud, así como de la documentación solicitada, no implica aceptación u obligación del pago de los incentivos por parte de la SAGARPA, los órganos sectorizados y las instancias ejecutoras.

n) El que suscribe , bajo protesta de decir verdad, manifiesto que los ingresos que percibo son insuficientes para adquirir los alimentos de la canasta básica, por lo que me encuentro en condición de pobreza alimentaria, de tal forma que solicito apoyo del Componente Desarrollo Comercial de la Agricultura Familiar para instalar un huerto para la producción de alimentos al interior de mi vivienda.

ñ) TITULAR DE LA PRESENTE:

Los que suscribimos, representantes de , bajo protesta de decir verdad, manifestamos que formamos parte de la población objetivo del "Componente Desarrollo Integral de Cadenas de Valor" Estratos (E1, E2, E3, E4, Diagnóstico del Sector Rural y Pesquero, FAO-SAGARPA 2012) y solicitamos participar de los apoyos y beneficios que el Gobierno Federal, otorga a través de dicho Componente, para lo cual proporcionamos nuestros datos y documentos requeridos, señalando que son verídicos, comprometiéndome a cumplir con los criterios y requisitos de elegibilidad establecidos.

**8. OBSERVACIONES en su caso.**

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| **9. FIRMAS:** | | | **Sello de la**  **ventanilla** |
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| **9.1 Nombre completo y firma o huella digital del o los solicitantes** | | |  |
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| **9.2 Nombre completo y firma del representante legal (o en su caso del representante del Grupo)** | | |  |
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| **9.3 Nombre completo, firma y cargo del funcionario receptor (indicar Instancia Ejecutora a la que pertenece)** | | |  |
|  | | |  |
| **Lugar y Fecha** | | |  |

“Los datos personales recabados serán protegidos e incorporados y tratados en el sistema de datos personales “base de datos de beneficiarios de programas de apoyo” con fundamento en la Ley Federal de Transparencia y Acceso a la Información Pública Gubernamental, así como la Ley Federal de Protección de Datos Personales en Posesión de los Particulares y cuya finalidad es proporcionar información sobre los beneficiarios de los diversos programas de incentivo, a efecto de dar protección a los datos de los beneficiarios de los apoyos de los programas y componentes”.

***“Este Programa es público, ajeno a cualquier partido político. Queda prohibido su uso para fines distintos a los establecidos en el Programa”***