**TEMPLATE FOR CONCEPT NOTE SUBMISSION**

WINDOW 1 CONCEPT NOTE TEMPLATE

## Productive Alliance Sub-Project – Concept Note for Window 1 PAs Template

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| **Introduction** | | | | | | |
| **Proposed Productive Alliance/Sub-project Title:** | | | | | | |
| **Value Chain:** | | | | | | |
| **Productive Alliance parties:** | | | | | | |
| ***Producers’ Organization*** | | ***Off-taker*** | | | | |
| *Name:* |  | *Name:* | |  | | |
| *Address:* |  | *Address:* | |  | | |
| *Contact details:* |  | *Contact details* | |  | | |
| *Name of Chairperson* |  | *Representative Name:* | |  | | |
| *Location (EPA, District,* |  | *Designation:* | |  | | |
| *ADD* |  | *Location (District/town):* | |  | | |
| **Total Sub-Project Cost:** | | **Mwk** | | | | |
| **AGCOM Contribution (70%):** | | **Mwk** | | | | |
| **PO Cash Contribution (10%):** | | **Mwk** | | | | |
| **PO In-kind Contribution (20%):** | | **Mwk** | | | | |
|  | | | | | | |
| **Producers’ Organization (PO) Profile** | | | | | | |
| **Type of PO**  Please indicate the type of PO: cooperative/ association, Farmer’s club, Milk bulking group, Informal group (please specify), other (please specify) | |  | | | | |
| **Year of establishment** | |  | | | | |
| **Year of registration** | |  | | | | |
| **Active Membership**  Please indicate the number of active members, either those paying the group fees or those participating in the most recent group activity:  Attach Membership list, age, ID Number, Gender, | | Total: | | | | |
| Male: | | | | |
| Female: | | | | |
| Male Youth (18-35yrs): | | | | |
| Female Youth (18-35yrs): | | | | |
| **Experience in the selected value chain** | | | | | | |
| Please indicate the number of years that the PO has been engaged in the production and collective marketing of the selected product(s). | |  | | | | |
| Please indicate the PO’s total production of the selected product(s) in the last 3 years. | |  | | | | |
| Please indicate the PO’s total collectively marketed production of the selected product(s) in the last 3 years /seasons. | |  | | | | |
| Years in collective marketing: | |  | | | | |
| Years in production: | |  | | | | |
| Production (T/L/heads): | | Year | 1 | | 2 | 3 |
| Volume (Mt./Ltr |  | |  |  |
| Area (ha) |  | |  |  |
| Herd Size (no) |  | |  |  |
| Total quantity sold collectively: | | Year | 1 | | 2 | 3 |
| Volume Collectively sold (Mt/Ltr) |  | |  |  |
| Total value of collective revenue: | | Year | 1 | | 2 | 3 |
| Value of Collective Sales (Mwk) |  | |  |  |
| **PO contribution**  *Please indicate* ***if****,* ***how much*** *and* ***in what form*** *the PO can contribute to the total costs of the sub-projects* | | | | | | |
| Total cash contribution: | |  | | | | |
| Please provide details for Sources of  Cash Contribution: | |  | | | | |
| Value of Total in-kind Contribution: | |  | | | | |
| Please provide details for Sources of  In-kind contribution | |  | | | | |
| **Off-Taker Profile** | | | | | | |
| **Description of the Off-Taker and Market Opportunity**  *Please provide a brief description of the off-taker (type of company, products marketed, areas of operation, etc.)* | |  | | | | |
| **Year of establishment** (in Malawi) | |  | | | | |
| **Years of operation in the selected value chain**  *Please indicate for how long the off-taker has been involved in the selected value chain and in which capacity.* | | . | | | | |
| **Experience in working with smallholder farmers**  *Please indicate your experience in working with smallholder farmers for the past three years, including past relationships with the respective PO* | |  | | | | |
| **Average Annual Volume Purchased**  *Please indicate the average yearly quantity of the selected value chain purchased by the off-taker in the last three years* | |  | | | | |
|  | | | | | | |
| **Productive Alliance/Sub-project** | | | | | | |
| **Current situation of the PA**  *Please indicate the main challenges for business growth, productivity increase, meeting quality standards/off-taker specifications, etc.*  *Briefly describe the market opportunity that the PO would like to address in the proposed subproject. (demand on domestic and international markets, changes in consumer preferences, penetration of new/niche markets, etc.)* | |  | | | | |
| **The objective of the PA**  *Please provide – in quantitative and annual terms – the objective of the partnership between the PO and the off-taker* | | | | | | |
| Objective (business) of the PA: | |  | | | | |
| Product(s): | |  | | | | |
| Annual quantities: | |  | | | | |
| Quality specifications (if any): | |  | | | | |
| **Production targets**  *Please indicate the necessary production targets (total annual production, production per member/hectare/animal) required to meet the objective, as well as the expected participating PO members.* | | | | | | |
| Required area (ha)/herd: | |  | | | | |
| Required yield: | |  | | | | |
| Participating members (T/M/F/Y): | | Total: | | | | |
| Male: | | | | |
| Female: | | | | |
| Male Youth (18-35yrs): | | | | |
| Female Youth (18-35yrs): | | | | |
| **Price**  *Please indicate whether the price has been on price conditions.* | | | | | | |
| Have you agreed the on Price:  *If yes indicate the price:* | |  | | | | |
| If not, provide Price conditions or a mechanism agreed upon | |  | | | | |
| **Agreement Parameters**  *Provide key agreement parameters such as :* | | | | | | |
| Quality: | |  | | | | |
| Delivery conditions: | |  | | | | |
| Delivery/Collection Period: | |  | | | | |
| Payment schedule: | |  | | | | |
| **PO Investment Needs**  *Briefly explain the proposed investment in line with the stated challenges:*  *Specify and quantify the PO’s investment needs to reach the production targets required to meet the market objective. opportunity. Structure the investment needs in terms of:* | | | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | ***Productive assets:*** *equipment, machinery, infrastructure, etc.* | | | | | | ***Item*** | ***Quantity*** | ***Unit cost*** | ***Total cost*** | |  |  |  |  | |  |  |  |  | |  |  |  |  | | ***Technical assistance****: training, certifications, etc.* | | | | | |  | ***Quantity*** | ***Unit cost*** | ***Total cost*** | |  |  |  |  | |  |  |  |  | | | | | | | |
|  | | | | | | |
| **Off-Taker Contribution and Commitment**  *Please indicate if:* | | | | | | |
| he off-taker has committed to purchase a defined quantity under clear price parameters at an agreed date (please provide details) | |  | | | | |
| The off-taker has committed to make a monetary contribution (Yes/No, indicate value) | |  | | | | |
| The off-taker has committed to make in-kind contributions (Yes/No, type and estimated value) | |  | | | | |
| The off-taker has committed to provide direct technical assistance (Yes/No, type, estimated value) | |  | | | | |
| Other indications of off-taker contribution and commitment. | |  | | | | |
| **Climate Smart Agriculture (CSA) technologies**  *Describe how the interventions will incorporate climate-smart approaches to prepare for/reduce/minimize the impact of climate change*. | |  | | | | |
| **Environmental and Social Safeguards**  *Describe the potential environmental and social impacts that may arise due to the implementation of the subproject.* | |  | | | | |
| **Expected impacts on PO and its members**  *Please provide an estimate of the expected impact on the PO (increase in production volume, revenues, productive assets) and its members (Accumulation of Assets, increased revenues, food security and nutrition security, etc.)* | |  | | | | |
|  | |  | | | | |
| **Important information in support of the concept note**  All POs must provide the following attachments:   1. Copy of Cooperative certificate (if Cooperative) or Letter of Commitment to register as a cooperative. 2. Offtaker Letter(s) of Commitment to purchase all of the proposed production. 3. Evidence of Ownership of Land for collective assets (Any of the following: Lease, Customary land Certificate, Change of Ownership document from respective DC, Stamped letter from the relevant Traditional Authority). 4. List of Membership including Name, Age, Gender, National ID Number, Amount commitment to contribute, signature; 5. A recommendation letter from the Director of Agriculture Service in the respective proposed intervention district.   ***Notification of Feedback Mechanism***  *The productive Alliance shall receive formal feedback of the application through* ***the Director of Agriculture Services in their respective districts.***  *In addition, the project will send copies of the feedback through the contact email address provided below:*  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (optional)*** | | | | | | |
| Signatures | | | | | | |
| **PO Chairperson** | | **Offtaker Representative** | | | | |
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