NOTE: The purpose of this concept note is for applicants to express interest and demonstrate their value addition for undertaking activities with the support of the KCDMS activity. The concept note is to assist KCDMS to better understand and select viable and sustainable agribusiness ideas that match KCDMS objectives. The concept note is not a full description of the proposed intervention by the applicant and the applicant will be required to develop a detailed project proposal and budget if their concept note is selected to move to the next stage of competition.

Instructions:
Please use the following format to submit your concept paper. The Concept papers shall be submitted in English, be no longer than 5 pages, and be signed by a senior representative who is authorized to make commitments on behalf of the organization.

1. APPLICANT INFORMATION:

<table>
<thead>
<tr>
<th>Organization Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Organization:</td>
</tr>
<tr>
<td>Organization type/legal entity: (CBO, SHG, Cooperative, company etc.)</td>
</tr>
<tr>
<td>Organization registration number and the designated authority with whom it was registered:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Membership</th>
<th>Male: _________</th>
<th>Female: _________</th>
<th>Youth: _________</th>
</tr>
</thead>
<tbody>
<tr>
<td>For KCDMS “Youth” is defined as below 30 years of age.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Person:</td>
</tr>
<tr>
<td>Designation:</td>
</tr>
<tr>
<td>Postal Address: (Organization)</td>
</tr>
<tr>
<td>Physical address of the organization: (Location)</td>
</tr>
<tr>
<td>Telephone/Mobile number &amp; Email address:</td>
</tr>
</tbody>
</table>

2. PROJECT DETAILS:

<table>
<thead>
<tr>
<th>Project Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>County(ies) where the activity will be implemented:</td>
</tr>
</tbody>
</table>
### Background, purpose and outcomes:

Provide a brief description of your organization/group/business and describe the opportunity that this grant seeks to address and the expected results, with an emphasis on how the activity will benefit women, youth, or otherwise marginalized groups. If your group is engaged in business, please explain briefly the nature of the business and the current level of revenue.

### Activities and outputs:

Briefly describe the key activities and outputs you will achieve with this assistance.

### Type of In-kind grant:

With the knowledge that this is an in-kind grant (all support will be through the provision of material goods and services, NOT the provision of cash support), please specify the type of agricultural or related equipment that you need to meet your project objectives. Please be as specific as possible, including any known information on type, model, size, capacity, etc.

### Management and maintenance of the in-kind grant

The applicant is solely responsible for the management and maintenance of any grant funded equipment. Please provide a brief description of how you intend to manage and maintain the equipment requested above.
**Technical capacity Building:**
Provide a brief description of areas for improvement for which the organization may require training or technical support. Outline the kind of support required (the technical capacity areas should be in line with what has been specified in the RFA).

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**Target beneficiaries:**
Briefly describe your target beneficiaries and how you will engage them. How many farmers are you targeting to achieve your objectives? What percentage are women and/or youth?

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**Budget Estimate:**
This is an estimate only, organizations that make it to the next stage of competition will work with KCDMS to compile more detailed costs of activity implementation.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>AMOUNT (KES)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of Equipment</td>
<td></td>
</tr>
<tr>
<td>Cost of capacity building</td>
<td></td>
</tr>
<tr>
<td>Technical assistance for installation, etc.</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
</tr>
<tr>
<td>Cost Share (10%) of Equipment cost</td>
<td></td>
</tr>
</tbody>
</table>

How will you raise the 10% cost share?

---

I declare, as the official representative of the above-named organization, that the information provided in this expression of interest is correct and accurate and that it is subject to verification by KCDMS.

Submitted by: _______________________________

Signature: _________________________________

Date: _________________________________