OMB Number: 4040-0004
Expiration Date: 11/30/2025

Application for Federal Assistance SF-424

* 1. Type of Submission:
- [ ] Preapplication
- [x] Application
- [ ] Changed/Corrected Application

* 2. Type of Application:
- [x] New
- [ ] Continuation
- [ ] Revision

* If Revision, select appropriate letter(s):

* Other (Specify):

* 3. Date Received: 05/12/2023

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name: NGO CENTER OF AGRO INFORMATION INNOVATION OF UZBEKSITAN

* b. Employer/Taxpayer Identification Number (EIN/TIN): 44-4444444

* c. UEI:

d. Address:

* Street1: 1 Ismoil ota
Street2:
* City: Tashkent
County/Parish:
* State:
Province:
* Country: UZB: UZBEKISTAN
* Zip / Postal Code:

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: Mr.
* First Name: Mirzohid
Middle Name:
* Last Name: Yuldashev
Suffix:

Title: Director

Organizational Affiliation:

* Telephone Number: +998942089898
Fax Number:

* Email: uzagroinnovation@gmail.com

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

W: Non-domestic (non-US) Entity

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

US Department of State, US Embassy Tashkent

11. Catalog of Federal Domestic Assistance Number:

19.900

CFDA Title:

Assistance for Europe, Eurasia, and Central Asia

*** 12. Funding Opportunity Number:**

TASHKENT-PDS-FY23-002

* Title:

Democracy Commission Small Grants Program

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment | Delete Attachment | View Attachment

*** 15. Descriptive Title of Applicant's Project:**

"Engaging women in the rural areas in the agricultural value chain through leader female farmers and improving their livelihoods"

Attach supporting documents as specified in agency instructions.

Add Attachments | Delete Attachments | View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant: 00-000 * b. Program/Project: 00-000

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment | Delete Attachment | View Attachment

17. Proposed Project:

* a. Start Date: 10/01/2023 * b. End Date: 09/30/2024

18. Estimated Funding ($):

* a. Federal	44 965,00
* b. Applicant	
* c. State	
* d. Local	
* e. Other	
* f. Program Income	
* g. TOTAL	44 965,00

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

☒ a. This application was made available to the State under the Executive Order 12372 Process for review on .

☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.

☐ c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

☐ Yes ☒ No

If "Yes", provide explanation and attach

Add Attachment | Delete Attachment | View Attachment

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)**

☒ ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name: Mirzohid

Middle Name:

* Last Name: Yuldashev

Suffix:

* Title: Director

* Telephone Number: +998942089898 Fax Number:

* Email: uzagroinnovation@gmail.com

* Signature of Authorized Representative: * Date Signed: 05/12/2023

O'ZBEKISTON AGRO AXBOROT-INNOVATSIYA MARKAZI
AGRO AIM