

APPLICATION FORMAT

Application for the Scheme _____

Name and Address of the Unit
[Office & Factory Location(s).]

Details of E.M. No. ;
Date of issue; Directorate of Industries/
GM, DIC of the State concerned
(Enclosed an attested copy of all pages
Of SSI Registration Certificate)

Item(s) of Manufacture /Processing
as indicated in the E.M. Certificate.

Proof of SSI Status and Functional Status of the Unit as on the Date of Submission of Application.
The following document(s) to be submitted:

A Certificate (in original) from State DI/GM, DIC confirming Micro/Small unit and functional status as on date.

OR

Certificate for C.A.

DECLARATION

I (full name)
S/o ofManaging Director/Director/ Proprietor/Partner of M/s.
(complete address) hereby declare That the particulars given in the application are correct. In case any of the Statement/information furnished in the application/documents later found to be wrong or correct or misleading, I do hereby bind myself and my unit to pay to the Government on demand the full amount of subsidy in respect of above mentioned activity within seven days of the demand being made to me in writing. The relevant documents are enclosed with the application.

Name and Signature of Managing Director/

Director/Proprietor/Partner of Small/Micro Unit

(Full Name)