

**CHEMEXCIL**

**Basic Chemicals, Cosmetics & Dyes Export Promotion Council**

4th Floor, Jhansi Castle, 7, Cooperage Road, Mumbai 400001

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Email: suhas.bansode@chemexcil.gov.in

**Application Form for Exhibition / BSM**

|  |
| --- |
| *\* All Fields are mandatory*Name of the Exhibition : Date :Country : |
| **Part ‘A’**1. Name of the Company : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Type of company: Private Ltd/Proprietorship/Partnership Firm/ State/Central Govt.
3. Chemexcil Membership No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_1. Tel. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Email : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Website : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Products for display/Sale/Trade (with 6 digit HS Codes):**

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **HS Code No.** | **Name Of The Product** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

 **( if more products then enclosed separate sheet )**1. Passport details of the participants who will attend the exhibition :

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Sr No. | Name of Person  | Passport No. | Designation | Date of Issue | Date of Expiry | Place of Issue | Date of Birth & Nationality |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Are you a member of any other EPC/Commodity Board /Federation? if yes please  specify :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_1. Details of earlier participations in the same exhibition under MAI assistance for last three years:

If yes (Tick):- 1st time 2nd time 3rd time More than 4 times 1. Details of your participation in the same financial year under MAI Scheme through CHEMEXCIL
2. Name & place of the fair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Name & place of the fair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| **Part ‘B’** 1. Company PAN No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. COMPANY CIN : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. IMPORT/EXPORT CODE (IEC) NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Company Directors Details:-

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Name of the Director** | **DIN NO.** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

**( If additional Directors, then enclosed the filled sheet as per above format )** |
| **Part ‘C’*** Total Turnover of Company last 3 years **(RS. IN CRS)**

|  |  |
| --- | --- |
| Year  | Turnover |
| 2018-19 |  |
| 2017-18 |  |
| 2016-17 |  |

* **Export Turnover last 3 years** **(RS. IN CRS)**

|  |  |
| --- | --- |
| Year  | Turnover |
| 2018-19 |  |
| 2017-18 |  |
| 2016-17 |  |

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|  |  |  |
| --- | --- | --- |
| **Part ‘D’**1. **Space requirement :**

|  |  |
| --- | --- |
| **Shell Scheme**: Sq. Mtrs. | **Raw Space**: Sq. Mtrs. |

 **ii)** **Payment Details:** **Amount: Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(If TDS Deducted then please specify the % of TDS deduction)****Amount paid by (Tick the option and fill the details )*** RTGS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_\_
* DD No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_

 Demand Draft should be drawn on : **“CHEMEXCIL SBI A/c No 10996680758”** |

We have read the Council’s Rules & Regulations for participation in exhibitions and hereby agree to accept and abide by the same.

 (Signature of authorized signatory of the company)

 Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Designation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company Seal : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\* Please read the rules of participation in exhibitions of the Council which is uploaded on the stall booking page. \***