

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

4<sup>th</sup> Floor, Jhansi Castle, 7, Cooperage Road, Mumbai 400001 Tel. No. : +91 22 22021288 /1330 / 22825861 Fax No.: +91 22 22026684 Email:<u>suhas.bansode@chemexcil.gov.in</u>; <u>amrita.regulatory@chemexcil.gov.in</u>

## **Application Form for Exhibition/BSM**

* All Fields are mandatory										
Name of the Exhibition :										
Date :										
Country :										
Part 'A'										
1. Name of the Company :										
2	2. Type of company: Private Ltd/Proprietorship/Partnership Firm/ State/Central Govt.									
3	3. Chemexcil Membership No.									
	4. Address :									
		_								
5	5. Tel. :		:_	: Fax:						
6			:_	Mobile No:						
7	. W	ebsite								
8	. Pr	oducts f	for dis	play/Sale/T	rade (with 6	digit HS	Codes):			
S	Sr. No. H		HS Co	IS Code No. Name Of The Product						
(if	more	e produc	ts the	n enclosed	separate she	et)				
9	. Pa			of the partic	ipants who will	attend th	ne exhibitic	on:		
	Sr	Name o	of	Passport	Designation	Date	Date of	Place	Date of	
	No.	Person		No.		of	Expiry	of	Birth &	
						Issue		Issue	Nationality	
L			Į		<u>I</u>	<u> </u>	I	<u>I</u>	<u> </u>	
•				•	Commodity B			if yes ple	ease	
spec	specify :									
1	10. Details of earlier participations in the same exhibition under MAI assistance for last									

three years:										
If yes (Tick):- 1 <sup>st</sup> time 2 <sup>nd</sup> time 3 <sup>rd</sup> time More than 4 times										
11. Details of your participation in the same financial year under MAI Scheme through										
CHEMEXCIL										
1 Name & place of the f	1. Name & place of the fair									
2. Name & place of the fair										
Part 'B'										
	. Company PAN No. :									
	2. COMPANY CIN :									
	B. IMPORT/EXPORT CODE (IEC) NO									
	Company DirectorsDetails:-									
	e of the Director	DIN NO.								
1										
3										
4										
(If additional Directors, then e	nclosed the filled sheet	as per above format )								
Part 'C'										
Total Turnover of Comparison	ny last 3 years(RS. IN CR	(5)								
Maar	<b>T</b>									
Year	Turnover									
2018-19										
2010-13										
2017-18										
2016-17										
Export Turnover last 3 years(RS. IN CRS)										
Year	Turnover									
2018-19										
2017-18										
2016-17										
	1									

Part 'D'								
i. 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.\*