**Application form for filing Entrepreneurs Memorandum PART-I ( EM-I)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1 |  | Name of Applicant | : |  |  |
| 2 | (a) | Address of Communication with PIN No | : |  |  |
|  |  | (i) Telephone no | : |  |  |
|  |  | (ii) Fax Number | : |  |  |
|  |  | (iii) Cell Phone No | : |  |  |
|  |  | (iv) E-mail | : |  |  |
|  |  | (v) Web-site | : |  |  |
|  | (b) | Permanent Residential Address ( Main Applicant) | : |  |  |
|  |  | (i) Telephone no | : |  |  |
|  |  | (ii) Fax Number | : |  |  |
|  |  | (iii) Cell Phone No | : |  |  |
|  |  | (iv) E-mail | : |  |  |
|  |  | (v) Web-site | : |  |  |
| 3 |  | Name of proposed Enterprise ( if decided) | : |  |  |
| 4 |  | Proposed Location | : |  |  |
|  | (i) | Village/Town | : |  |  |
|  |  | Village/Town Code | : |  |  |
|  | (ii) | Tehsil/Taluka/Mandal | : |  |  |
|  |  | Code of Tehsil/Taluka/Mandal | : |  |  |
|  | (iii) | District | : |  |  |
|  |  | District Code | : |  |  |
|  | (iv) | State | : |  |  |
|  |  | State Code | : |  |  |
|  | (v) | Pin code | : |  |  |
|  | (vi) | Area ( Rural-1, Urban-2) | : |  |  |
| 5 |  | Category of Enterprise | : |  |  |
|  |  | (Micro-1, Small-2, Medium-3) | : |  |  |
| 6 |  | Nature of Activity ( Tick appropriate boxes) | : |  |  |
|  | (i) | Manufacture | : |  |  |
|  | (ii) | Service | : |  |  |
| 7 |  | Nature of operation | : |  |  |
|  |  | ( Perennial-1, Seasonal-2, Casual-3) | : |  |  |
| 8 |  | Whether the unit will be an ancillary | : |  |  |
|  |  | (Yes-1, No-2) | : |  |  |
| 9 |  | Proposed schedule of installation of plant and machinery | : | MM/YYYY |  |
| 10 |  | Type of organisation | : |  |  |
|  |  | (Proprietory-1, Hindu undivided family-2, Partnership-3, Co-operative-4, Private Ltd company-5 Public Lt Company-5, Self-help group-7, others-8) | : |  |  |
| 11 | (a) | Manufacturing/Service activity | : |  |  |
|  |  | Name | : |  |  |
|  |  | Code (NIC 98\*) | : |  |  |
|  | (b) | Product to be manufactured/Service to be provided | : |  |  |
|  |  | (i) Name | : |  |  |
|  |  | Code (ASICC 2000\*) | : |  |  |
|  |  | (ii) Name | : |  |  |
|  |  | Code (ASICC 2000\*) | : |  |  |
|  |  | (iii) Name | : |  |  |
|  |  | Code (ASICC 2000\*) | : |  |  |
|  |  | (iv) Name | : |  |  |
|  |  | Code (ASICC 2000\*) | : |  |  |
|  |  | (v) Name | : |  |  |
|  |  | Code (ASICC 2000\*) | : |  |  |
| 11 |  | (\*) Codes for activities and products/services as per classification specified from time to time by the Development Commissioner ( Small Scale Industries) Government of India to be filled in by the DIC or the office where the EM is submitted. ( Add additional sheet for more products) | | | |
| 12 | (a) | Proposed investment in Fixed Assets ( Rupees in lakh) | : |  |  |
|  |  | (i) Land ( Owned-01/Rented-02/Leased-03) | : |  |  |
|  |  | Approximate value | : |  |  |
|  |  | (ii) Building ( Owned-01/Rented-02/Leased-03) | : |  |  |
|  |  | Approximate value | : |  |  |
|  |  | (iii) Plant & Machinery value | : |  |  |
|  |  | (iv) Equipment Value ( in case of service enterprise) | : |  |  |
|  |  | (v) Foreign Equity, if any, value | : |  |  |
| 13 |  | Installed Capacity ( proposed per annum) | : |  |  |
|  |  | (i) Plant A | : | Qty | Unit |
|  |  | Product | : |  |  |
|  |  | Product | : |  |  |
|  |  | Product | : |  |  |
|  |  | (i) Plant B | : | Qty | Unit |
|  |  | Product | : |  |  |
|  |  | Product | : |  |  |
|  |  | Product | : |  |  |
| 14 |  | Power load ( Anticipated ) HP/KW | : |  |  |
| 15 | (a) | (i) Other source of energy/power if required | : |  |  |
|  |  | ( No power needed-1 , Coal-1,Oil-2, LPG-4, Electricity from Grid-5, Electricity from Generetor-6, Non-conventional energy-, Traditional energy /Firewood-8) | : |  |  |
|  |  | (ii) If no power required, specify reasons | : |  |  |
|  |  | (iii) Indicate annual requirement source of energy | : | Qty | Unit |
|  |  | ................................................ | : |  |  |
|  |  | ................................................ | : |  |  |
|  |  | ................................................ | : |  |  |
| 16 |  | Expected employment ( nos) | : |  |  |
|  |  | (i) management | : |  |  |
|  |  | (ii) Supervisor | : |  |  |
|  |  | (iii) Workers | : |  |  |
| 17 |  | Entrepreneurs profile ( of all partners/directors of the organisation) | : |  |  |
|  |  | (a) Name | : |  |  |
|  |  | (i) Male (M)/Female(F) | : |  |  |
|  |  | (ii) SC(1)/ST(2)/OBC(3)/Others(4)/ Physically challenged (5) | : |  |  |
| 18 |  | Expected schedule of commencement of Production/activity | : | MM/YYYY |  |
|  |  | Date | : |  |  |
|  |  | Place | : |  |  |
|  |  |  |  | **Signature of the applicant** | |
|  |  | **Undertaking** |  |  |  |
| This is to certify that the information furnished in the memorandum in Form No ... is true and correct to the best of knowledge and belief. | | | | | |
|  |  |  |  | **Signature of the applicant** | |